

SO YOU'RE HAVING A HERNIA OPERATION

Hernia surgery is usually carried out under the effects of a General Anaesthetic which necessitates Hospital Admission.

The commonest site for herniation is in the groin region and this is particularly so in the Male. Umbilical herniation whilst common, is less likely to require surgery though there are exceptions. The type of repair required varies and the method chosen has been explained to you by Dr. Nicholson at your Initial Consultation. All require a cut for each hernia. Open surgery involves the placement and fixation of a nylon type material mesh which gives good support. Fixation may be with sutures or staples. Laparoscopic or key-hole surgery for herniae is done via three small cuts, one to the left and below the umbilicus and two more in the midline lower down from this. Once again, mesh is placed, this time on this occasion with "tacks" which are like little cork screws and these are inserted with a special disposable "tacker."

Local Anaesthetic is injected to reduce post-operative pain and unfortunately this wears off after a few hours and the operative site may be quite sore generally for a few days. Because herniae cause a lump and this means tissue has been displaced, bruising after surgery is expected and gravity will drag the bruise south into the loose tissue of the groins and scrotum, which may then appear coloured with a range of hues from black to red or yellow. Unless excessive, accompanied by gross swelling or progressive; only time is required for its dissolution. When wounds are closed, a seam is formed in the underlying tissue by layers of sutures, body fluids then flow in and a swelling like a pork sausage may occur. As the body is healing this will slowly become smaller. Scar tissue is fairly rigid with little give and therefore movement may feel a bit sore and next day, after stretching scar tissue it may feel tighter. Pulling on "anchor" points, i.e. where staples or sutures have been placed is common with movement, a bit like a tent pulling in the wind. Scar tissue thins to a chamois like quality with time (approx 3-4 months) allowing more ease with movement whilst maintaining good strength.

Cuts in the pubic area, though closed with sterile material, usually self-dissolving, involve hair-bearing area and these hairs may get buried causing a wound to weep slightly. A wipe with Methylated spirits several times each day goes a long way towards solving this problem; no anti-biotics are generally needed for this. Keyhole wounds are closed with little staples which will be removed prior to discharge next day.

Modern hernia surgery is designed to cause less pain and to restore normal anatomy or strengthened anatomy much faster so that return to even heavy duties is generally quicker. No more 6-8 weeks off work!!! Dr. Nicholson keeps at the "cutting face" of modern methods of repair hence may use options that you have not heard of before. Should you have any questions beforehand or problems after, he would expect you to communicate them to him directly, on (07) 3345 6667. Certificates will be provided to you or your relatives whilst you are in Hospital or when they arrive to pick you up. Rest is required until pain decreases and then increasing activities can be undertaken.

You may drive a normal car within days of surgery and lifting may be introduced from a few days after surgery up to about 10 kilos. Heavier lifting will be discussed with you as a topic after surgery. A good rule is do it 'til it hurts, do a little more, and then back off'. Repeat every few hours.

Complications of hernia surgery are infection, chronic nerve pain (because of the scarring of healing) and recurrence of herniation. Recurrence poses a different set of complications which may involve the viability of the testis and/or fertility. A recent paper suggested that the use of mesh by open or laparoscopic means may increase the risk of infertility, this risk though small is of serious concern.

If you have any questions for Dr Nicholson pre-operative or post-operatively, please call him on (07) 3345 6667, as he would prefer to blow out a match stick then to put out a bush fire.

.....
I acknowledge that I have discussed the nature, likely results, and risks of the recommended operation/procedure and/or treatment.

Signed Date

Patient Name.....

HERNIA OPERATION

