

Laparoscopic repair of Inguinal Hernia

Day Surgery Unit

Surgical Short Stay Unit



Patient information leaflet

What is an inguinal hernia?

A hernia is a defect in the abdominal wall (stomach muscles). When there is increased pressure in the abdomen i.e. when coughing, lifting or straining, some of the bowel can be forced through the defect, causing a lump to appear.

The defect can be something you're born with, but it is often caused by frequent strains on the abdomen e.g. a physical job.

What is a laparoscopic hernia repair?

This is the surgical repair of hernias in one or both groins using the laparoscopic or 'keyhole' technique. Three or four small cuts are made in the lower abdomen. A tiny camera is passed through one of these cuts; the others are used for the surgical instruments. Both groins are examined. The defects are repaired and the repair is reinforced with a mesh. Then each cut in the skin is closed with a dissolvable stitch and dressed.

Are there any alternatives?

People with small inguinal hernias may go on for some time without having surgery. Some wear a truss to prevent bowel from protruding. However, this is a temporary measure. Your hernia may grow larger over the years, causing more pain and discomfort. There is also the risk that protruding bowel may twist or become blocked, which is very serious. A surgical repair is the only way of getting rid of the hernia.

What are the potential complications and risks?

If the hernia is large or difficult to repair, the surgeon may have to make a larger cut in the groin above the hernia. This is known as an 'open repair'. This may result in a longer stay in hospital.

There is a small risk of excessive bruising or swelling around the operation site. This may necessitate readmission to hospital for treatment.

Rarely, the body may react to the mesh used to reinforce the hernia repair, leading to a collection of fluid around the site. This problem usually resolves itself over time.

A small number of patients experience difficulty in passing urine after surgery. The nursing staff will ask you to go to the toilet before leaving the unit to minimise the risk of problems once you get home. In men, there is a small risk of shrinking of the testicle.

After your operation

Wound care

You will have dissolvable stitches in each wound. Keep the wounds covered, clean and dry for a week. You may then remove the dressings and shower or bath as usual.

Should your wounds become red, swollen, very tender or start to produce a discharge, ring the Day Surgery Unit or your GP for advice.

Will it hurt?

Moderate pain or discomfort is to be expected following a hernia repair. You will be given painkillers while on the unit and some to take home. All medication dispensed by the unit carries a prescription charge, unless you are exempt.

Exercise

You should get out of bed and potter around the day after your surgery. Gradually increase your activities as comfort allows. Avoid strenuous exercise for at least two weeks.

Driving

Do not drive for at least 24 hours following your anaesthetic. After this time you may drive when you are able to perform an emergency stop safely and comfortably. This may take two weeks.

The Driving Vehicle Licensing Agency (DVLA) advise that you check with your insurance company before you drive again.

Work/activity

It is advisable to have at least one week off work. You may return to work when you can perform your job comfortably and safely. The unit nursing staff can provide you with a doctor's certificate to cover time off work if required.

Sexual Intercourse

You may resume sexual relations when you have healed and feel comfortable and able.

Lifting and handling

Please avoid lifting and carrying objects that are heavier than two pounds/1kg for the next two weeks. This includes household cleaning, carrying shopping and heavy gardening.

Where lifting is unavoidable (small children etc.) bend your knees and not your back. Keep your feet shoulder-width apart to keep you stable. Carry the object against your body. Bend at the knees to put the object down.

Further appointments

An outpatients appointment will be forwarded to you through the post if required.

Reference source

- www.hopkinsmedicine.org

These notes will not cover everything. If you want to know more, please ask.

Contact details

If you require further advice, please do not hesitate to contact us.

Day Surgery Unit

Telephone: 01483 406783 (Monday–Friday, 8am–6pm)

Surgical Short Stay Unit

Telephone: 01483 406828 (Monday–Friday, 8am–6pm)

Out of hours advice

Call 111 (formerly NHS Direct)

www.nhsdirect.nhs.uk

PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–3.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

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