

FAQs

How long will my surgery take?

Small hernias can take 1 - 2 hours, whereas larger complex hernias can be anywhere from 3 - 10 hours.

How long will I be in hospital for?

Smaller hernias can be done as day surgery or an overnight stay. Patients admitted to the hospital after surgery stay 4-7 days on average.

Can I drive after hernia surgery?

Start driving once you are off pain medications and feel comfortable with sudden movements (e.g. braking)

When can I go back to work?

Most people are back to work after 1 - 2 weeks. Your surgeon may ask you to avoid from heavy lifting at work (>10lbs) for 4-6 weeks.

I still feel a lump/swelling after my hernia surgery, is this normal?

This is likely a seroma, a common normal fluid collection that fills the space left behind after fixing your hernia. Show it to your surgeon during your non-urgent follow-up appointment.

I'm still having twinges of pain, is this normal?

This is normal up to 6 months after your surgery. If it is getting progressively worse or interfering with your life, call your surgeon's office.

Can my hernia come back?

Yes, the chance of recurrence is low and using mesh reduces this risk. Avoid weight gain, smoking, and call your doctor if you suspect the hernia is back.

Your surgeon may have modifications to these general recommendations

More Information :



Hernia Info | FAQs | Patient Resources
www.canadianherniasociety.ca

Your Surgeon's Office:



Office Stamp



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Preparing for Open Hernia Surgery

Preparing for your Surgery

Your Surgery Date:



Stay active and exercise

“No heavy lifting” is a MYTH before surgery. So long as it doesn't cause excessive discomfort, exercise is encouraged before surgery and is helpful for weight loss and **minimizing surgical complications**

Quit Smoking

Smoking increases your risk of infections and poor wound healing. Talk to your doctor about programs that can help you cut down and quit.



Diabetes Management

Blood sugar control reduces your risk of wound infections and healing problems. Work with your family doctor to optimize your blood sugar.



The Day of your Surgery

1. Nothing to eat or drink after midnight
2. Follow instructions from your anesthesia team about what medications to take.
3. Arrive at the hospital well before your designated appointment time.

Your Hospital Stay

If you require a hospital admission, here are some things you might expect:

1. **Pain Control** - you might have an epidural or pain pump and then switch to oral meds
2. **Diet** - you will gradually be transitioned from liquids to solid food as your bowels start to work again
3. **Activity** - deep breathing and walking around is your job to maintain muscle mass, keep your lungs open, and wake up your bowels
4. **Catheters and drains** - You might have a urinary catheter (removed before discharge) and abdominal drains (may go home with one with homecare)



Complications

These can happen in hospital or at home:

- **Ileus** - “lazy bowels”, where your intestines don't move and you are bloated and nauseated. Treated with bowel rest (no food) and sometimes a nasogastric tube to decompress your stomach.
- **Wound Infection** - wound redness, pus, and fevers suggest an infection, which may require wound care and drainage
- **Seroma/Hematoma** - a common collection of benign fluid (seroma) or blood (hematoma) at your incision. Can often just be watched without treatment.

Postoperative Instructions

Wound Care

- Remove your dressings 48 hours after surgery
- Shower after your dressings are removed
- No soaking (no baths or swimming) your incision until it is healed over completely
- Staples removal will be arranged by your surgeon

Activity

- Listen to your body, gradually return to your work and daily activities if you feel able
- Gradually start light exercise (walking, swimming) when you tolerate it
- While we do not have strict restrictions, your surgeon may ask you to avoid heavy lifting. **Listen to your body** - if it hurts, you're not ready

Diet

- There are no specific dietary restrictions
- Eat a normal balanced diet as tolerated

Pain Control

- Use ice/cold compresses on your incision
- Your surgeon will recommend a combination of medications that you can take together, including acetaminophen, NSAIDs like ibuprofen, and narcotics if needed
- Treat constipation with laxatives like polyethylene glycol

What are signs of an emergency?

Call 911 or go to the nearest hospital if you are having **fevers, vomiting, unable to pass gas, sudden hard non-reducible bulge, or pus and redness** at your incisions.