Hernia Repair

This pamphlet will give you some guidelines to follow after your surgery.

The human body has a number of compartments (parts) which are held in place by a sturdy outside wall of muscle and tissue. A hernia forms when an outer wall ruptures (breaks open) or tears, letting organs such as a loop of bowel or tissue fall through the opening.

Types of hernias

Inguinal hernia
This is the most common type of hernia. It is usually due to a weakness in the wall which was there from birth.

Femoral hernia
This hernia is in the thigh just below the groin.
Umbilical hernia
This hernia looks like a bulging navel (belly button).

Incisional hernia
This hernia can happen in an area where the abdominal (stomach area) wall was weakened by surgery.

How is a hernia repaired?
The tissues or organs are put back in place inside the muscle wall. The surgeon then sews strong tissues over the problem area. If there are not enough natural tissues, a synthetic (man-made) patch will be used.

Care at home
Care of the incision (cut)

It is NORMAL to have swelling and bruising of the scrotum. Over time, this will resolve on its own. A soft gel ice pack or a bag of frozen vegetables wrapped in a towel can be used to relieve swelling and bruising.

• You may or may not have stitches. If you do, they will be removed about 7 to 10 days after surgery. You will be given an appointment with your primary health care provider or surgeon to have your stitches removed.
- If Steri-Strips™ have been used over the incision, they can be peeled off as they get loose. This will be about 7 to 10 days after surgery.

- Your surgeon will tell you when you can remove the dressing and when it is safe to take a shower (usually after 48 hours). Once your surgeon has said it is OK to shower, use plastic wrap (like Saran™ Wrap) over the dressing so that the incision does not get wet.

- Steri-Strips™ may get wet – pat them dry after showering.

- You may bathe when the incision is healed. This is usually about 10 days after surgery.

- If you have bleeding on the dressing, sit or lie down. Put steady pressure over the dressing for 20-30 minutes with a clean cloth or your hand. **If bleeding doesn’t stop, call your surgeon or go to your nearest Emergency Department.**

**Activity**

- The first few days at home should be quiet. You can do more activity over time. You will find that you tire easily and may need extra rest. Over time, your energy will come back. You can then start doing light housework, preparing small meals, walking, and riding as a passenger in a car for a short distance.
• Avoid vacuuming, heavy lifting (over 5 pounds), straining, and strenuous (hard) activities, including sports, for 6 weeks after surgery, unless told otherwise by your surgeon.

• It will take time for concentration and reflexes to return to normal. Do not drive for 1 week after surgery, unless told otherwise by your surgeon.

• **Do not drive a car if you are taking pain medication.**

• Loose clothing may be more comfortable.

• How soon you can return to work will depend on your type of work, as well as your general health and recovery.

• You may resume sexual activity (sex) whenever you feel well enough.

**Controlling discomfort**

• Take medication as prescribed by your surgeon.

• **Do not drink alcohol while taking pain medication.**
• If you had laparoscopic surgery (surgery done with a scope), you may have some discomfort in your shoulder and neck. This is normal and is caused by the gas placed into your abdomen during surgery. This usually goes away in 1 to 2 days. Warm packs, pain medications, and moving about will help ease this.

Meals
• Eat and drink in small amounts until you feel well enough to go back to your regular diet. Eating well-balanced healthy meals will help you to get your strength back.
• The foods you eat will affect your bowel movements (poops). If constipation (not being able to poop) is a problem, eat foods high in fibre. Bran cereals, whole-grain bread, green leafy vegetables, and fresh fruit are high in fibre.
• Drink 8 to 10 glasses of water a day, unless you are not allowed to because of another health problem. Ask your primary health care provider about using stool softeners or laxatives, if you need them. Remember, you do not have to have a bowel movement every day to be healthy.
Call your surgeon if you have:

› nausea (feeling sick to your stomach) and vomiting (throwing up) that lasts more than 1 day.
› redness, swelling, or warmth around the incision
› drainage from the incision
› separation of the edges of the incision
› pain that is not going away or is getting worse, even when taking your pain medications as ordered.
› increasing pain or tenderness around the incision
› fever or chills

Looking for more health information?
Find this pamphlet and all our patient resources here: http://library.nshealth.ca/PatientGuides
Contact your local public library for books, videos, magazines, and other resources.
For more information, go to http://library.novascotia.ca
Connect with a registered nurse in Nova Scotia any time: call 811 or visit https://811.novascotia.ca
Learn about other programs and services in your community: call 211 or visit http://ns.211.ca

Nova Scotia Health Authority promotes a smoke-free, vape-free, and scent-free environment.
Please do not use perfumed products. Thank you!
www.nshealth.ca

Prepared by: NSHA Same Day Surgery staff
Illustration by: Surgery On File™
Designed by: NSHA Library Services

The information in this brochure is for informational and educational purposes only.
The information is not intended to be and does not constitute health care or medical advice.
If you have any questions, please ask your health care provider.

WI85-0079 © June 2020 Nova Scotia Health Authority
The information in this pamphlet is to be updated every 3 years or as needed.