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INGUINAL HERNIA SURGERY DISCHARGE INSTRUCTIONS

You have had an inguinal hernia repair with mesh. Here are some guidelines to follow for your first few weeks at home:

Medications

You will be given a prescription for pain medication before you leave the hospital. If you experience constipation, any laxative is OK. We prefer lactulose.

Activities

- It is OK to shower the day after surgery
- Gentle walking for one week, then full walking afterward (this will minimise your risk of a blood clot in the leg)
- Do not stay in bed unless you are sleeping, a chair is better
- Do not drive or operate machinery while taking prescribed pain medication
- Return to work when you feel ready, **or as per surgeon's instructions**

Diet:

You may resume your normal diet when you feel up to it.

When to call the doctor:

- Vomiting or diarrhea lasting more than 24 hours
- Worsening abdominal pain. (Remember that the pain you feel should get a little better each day, but may take a couple of weeks to disappear.)
- Worsening redness or foul-smelling drainage from the incisions.

What if you have:

- **Constipation:** This is common after any operation with general anaesthesia, as well as if you are taking pain medication, since both have narcotics, which will delay bowel function. We recommend trying Lactulose. Any over the counter constipation remedy that you would normally take if you had not had any surgery is acceptable.
- **Pain:** Pain is expected after this operation and it usually fades by the end of the first week, but sometimes can last for many weeks. You now have mesh inside you. The sutures or tacks used to secure it can cause this pain. Each day, the pain should be similar or better than the day before, but it will fade slowly. If the pain is worsening daily, then please call your doctor.

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- **Headache:** Some patients experience headaches after operations. Paracetamol is OK to take. If the headaches persist, make sure to call your doctor.
- **Shoulder pain:** this may be common for several days after laparoscopic procedures, but if it persists for more than 2 days, then you should give us a call.
- **Swelling where the hernia used to be, or for men in the scrotum:** This can sometimes represent a seroma (benign fluid collection). Up to 15% of patients can develop a seroma, and in most cases, it will resolve on its own. If you feel the swelling is getting worse, or becoming painful, please notify your surgeon.

About your incision(s):

It is normal to have a little redness, purple colouring, and/or “black and blue” appear around the incision(s) after surgery. Often this represents bruising from the surgery. It should appear, then fade within days. If you feel it is getting worse, or becoming painful, please notify your surgeon. Your incisions are dressed with two layers: on the skin are little strips called Steristrips. Leave these for 10 days or until they fall off, whichever occurs first. On top of the strips is a clear dressing. The dressing can be removed SEVEN days after your surgery.

Men: In men, the scrotum or penis may become bruised (black and blue) or swollen. The swelling, if it occurs, can become large. This is usually from something called a seroma. If this is happening, there is nothing specific that needs to be done. Over time, in most situations, this will resolve completely spontaneously.

Exercise:

We recommend that you mobilise yourself early (the same day as the surgery), and it is OK to begin walking, using a treadmill with no resistance, or a stationary bike with no resistance, just to keep the groin regions loose on the first post-operative day. Full exercise can resume usually around four weeks post-surgery.

What you can and should not do will be up to your own surgeon. Please ask your surgeon for your precise restrictions, if any, especially if your work involves heavy lifting. You should avoid heavy lifting for six weeks.