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What to Expect post Hernia Surgery with Hernia Clinic Hampshire

Thanks to our new safe surgical technique, hernia surgery is efficient, and any pain can be managed with simple analgesia in the recovery period. This booklet covers all hernia repairs.

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All the information you need to make an informed choice about hernia surgery is within the '[Hernia Surgery](#)' section of our website and this leaflet. Please take the time to read and digest the information.



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Recovery and recuperation from a hernia operation

It is expected that with the pain relief medication provided and using the appropriate hernia support on discharge you will remain comfortable.

Bruising

The length of time you will need to take simple pain relief is related to the amount of bruising. Bruising nearly always looks frightful. It is usually a superficial bruise making you look literally 'black & blue'. Bruising can extend over a few days. The site of the hernia repaired dictates how large and where the bruise can be felt. The key point is: No matter how large the bruise, some simple pain relief and waiting up to a few weeks will fix it.

Bruising is complicated. There are a lot of factors that influence the extent of bruising, including:

- Size and complexity of the hernia
- How the hernia is repaired – open or keyhole
- Being overweight
- Medical conditions that affect bone marrow and tissue healing
- Regular blood-thinning medication
- Age and general frailty
- The 'luck of the draw'



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Wound dressings

We advise you to leave the wound alone and wait for it to heal by itself over time. This is approximately 12 days. The skin edges are closed with a suture that is invisible under the skin, so there are no sutures to see or remove. If you can feel an end of suture poking from the end of the scar it will disappear in 4-6 weeks. If a suture end is palpable by the time of making a follow up appointment, please book a face-to-face, follow up appointment. Then please let me know on the day and I'll be able to remove it there and then.

You will have two or three layers of dressing.

1. **Top layer:** Hernia support garment

The top layer (layer three) is called a pressure dressing and is there to apply firm pressure to the wound to reduce bruising.

Hernia Support Briefs or an umbilical/abdominal support belt/wrap act as a pressure dressing in the first 48 hours post-surgery. After this time, they support the recovering abdominal wall making mobilization easier and more comfortable (as reported by most people that have undergone this surgery before). Please see the letter sent by email when your surgery was confirmed for details of how to get these and how to use them.

We advised you pre surgery to buy an appropriate hernia support garment to wear post-surgery as discussed in your consultation. A well fitted support will also resolve your pre-operative symptoms, so the sooner you can get some the more useful they'll be.

Remember when buying the support pants (for a groin hernia) they should look like boxer shorts rather than the truss or belt that do not act as a pressure dressing or provide support post-surgery. View the available options. The umbilical/ventral abdominal supports are usually better in the wider format to avoid riding up or down.



The hernia support garments work better at reducing bruising than the older style pressure dressing. Most find these add comfort and wear them for as long as required post-surgery. A few find them uncomfortable, but we ask you bear with them for a minimum of 48 hours while the clots from surgery stabilize. Wear them under your clothes and in bed. You can take them off to shower and go to the toilet. We have found that the better the fit the better the results, so we recommend you measure your body as instructed by the manufacturer and order the accurate size needed. Use them pre-surgery as well for symptom relief.

2. Middle layer:

The middle layer (layer two) is a flat waterproof dressing. You can shower with it on and then pat it dry. It may last 12 days, and it is safe to leave it on for 12 days, but you might find that it starts falling off after 5-7 days and therefore need to change it. The hospital will provide you with some replacement dressings. The fewer times the dressings are changed the better as it reduces the risk of a minor wound infection. Please note the manufacturer's advice is to change them after 7 days but we have observed that patients have had better results keeping the wound covered with the same dressing for 12 days.

3. Bottom layer:

The bottom layer (layer one) of butterfly sutures needs to stay on for 12 days. These help to create a better scar appearance long term. At 12 days, you can remove all the dressings and the wound should be healed: dry and clean. To remove them first take the middle dressing off. I then suggest soaking the butterfly sutures by getting the wound wet. They should then lift off easily or simply rub off with a flannel. Now, gently wash the area with a wet flannel to remove any last clots.

An alcohol wipe removes any grimy glue from the edges around the dressing adhesive but may make the actual line of the scar sting so be careful wiping with it.



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Pain Relief

The best way to manage pain relief is to wear your hernia support and take pain-killer medication before any pain develops or becomes present enough to reduce your mobility or make you feel unwell. If you don't actively try to control the pain, hernia surgery can be painful.

If you do actively manage it, then recovery from hernia surgery should be reasonably straightforward. Non-drug methods of maximizing comfort are found by wearing the hernia pants recommended pre surgery.

To maximize your post-surgery comfort and recovery we advise that before the anaesthetic wears off (and before leaving hospital) you put on your hernia pants and start taking the paracetamol and ibuprofen prescribed to you on your discharge before leaving hospital.

It is common with any open hernia surgery to feel some altered sensation around the wound. It is the skin nerves recovering from the bruising and any surgical damage. The area involved slowly improves becoming less frequent over several months and becomes more normal as recovery progresses. Please note it takes up to 6 months to resolve but even then, a small percentage can have a permanent numb patch about the size of a 50p piece around the region of the scar. It is very rare for this skin change to remain painful in the long term.

The hernia support garments, if well fitted, also add to pain relief.

Use a combination of the below pain relief to get the most effective pain relief with the fewest ill/side effects of individual medications.

Paracetamol

Take two paracetamol capsules regularly four times a day. This medicine has few/no side effects and is safe in nearly everyone. Take it for as long as you are taking any other pain relief. Then reduce the number of times a day that you are taking Paracetamol, so you are comfortable and come off the medicine. This can take anything from 2-3 days to many weeks.

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Ibuprofen

Take two ibuprofen capsules, regularly to start with, three times a day. Always take them with food. Some patients can experience problems with this medicine as it can cause stomach irritation and affect kidney function. However, taking it for 48-72 hours with food should be safe even for those warned off it in the past. Please discuss this with me on the day of surgery if you have any concerns about taking it. Most people warned off this drug can take it safely for 2-3 days if the appropriate care is taken. Ibuprofen is a very effective painkiller, especially when taken with paracetamol.

Dihydrocodeine

This is a powerful opioid painkiller with a long list of side effects. Only take it if needed. You can take it up to four times a day with the paracetamol and ibuprofen as instructed above. It can cause constipation, nausea, poor appetite, headaches, drowsiness and affect concentration. You should not operate machinery while taking this or drive and you may need a laxative with it. We will send you home with one.

Laxatives

We will send you home with one. Opioid pain relief will cause constipation, but so can a change in diet and routine. We don't want you to have to strain to evacuate your bowel whilst recovering as this will be painful. It is better to use a laxative to ensure a good bowel habit, opening your bowels 1-2 times a day without straining. If you take too much laxative your bowels will become more frequent and stools waterier. Miss a dose or reduce your dose if this happens. Once a regular routine and exercise and diet is returned to your daily life you should be able to stop taking these.

In summary:

- **Wear the hernia pants all the time you are requiring medication and after as required.**
- **Take a combination of paracetamol and ibuprofen regularly until paracetamol is enough. Even if you have previously been told not to take ibuprofen it is usually safe for 48-72 hours, which is how long most people need it. – Ask if in doubt.**
- **Use a laxative to avoid constipation and straining on the toilet in the early recovery phase. Not doing this will increase your pain.**

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Mobility and Returning to Day-to-day Activity

The other significant factor involved in recovery is mobility.

Key rule #1 for the best outcome: Early mobilization after surgery is essential – particularly with the older generation.

Being still will only worsen stiffness and soreness making your recovery longer and more painful. Keep moving.

The first 48 hours are when the wound and clots are stabilizing. Bruising can be controlled by wearing your hernia pants with the pad initially and then with or without the pad as comfort allows. Be gentle with yourself in this period but remain mobile.

You can shower or wash at a basin from day one. The middle dressing layer is waterproof. Just pat it dry after your shower/wash.

From day 3 there are no absolute limitations on returning to activity if you follow this rule:

Key rule #2 for the best outcome: If it hurts (more than just being a bit uncomfortable) stop doing it and try again in a couple of days.

Most people can walk a mile and carry a small bag of shopping within a week. Some are walking the dog from day 3, others not till the end of week 2. Everyone's recovery is individual to them.

Please note that for your recovery it is better to take paracetamol and ibuprofen and move around than take no painkillers and stay still.

Compression (TED) stockings

TED stockings have been shown to reduce your risk of a DVT after general anaesthetic and so are routinely advised. Most hospitals advise you keep these on for 2 weeks after an operation. Your surgery though will almost certainly have been

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using LA/sedation and so the mechanisms that increase the risk of DVT after surgery in most are not as applicable to you. Hernia Clinic Hampshire advises that using TED stockings for 2 weeks if you have had previous DVT in the past, smoke/vape or have a BMI >30 is sensible to reduce your risk of a DVT and the complications that can arise from this. If, you are mobilizing normally, have not had a DVT in the past, do not smoke/vape and have a BMI <30 then TED stockings probably do not alter your risk of DVT much as it is already very low. In these cases, it is not unreasonable to stop wearing them after 24-48 hours.

“When can I drive again?”

For driving the DVLA states that you must be able to do an emergency stop. It is illegal to drive a car if you cannot do this. Some insurers have time limits in the small print of their contracts so it can be worth calling them to make sure you are covered to drive again. On average after hernia surgery expect not to drive for 10-14 days.

WARNING: Most problems arise from simple activity such as gardening or DIY when it is too easy to forget you have just had surgery and try to lift, move, push things that are too heavy from a weak position. Please be careful doing these activities in the first 6-8 weeks even when you feel very comfortable. - *Imagine you are being good after attending your workplaces manual handling training. Follow those sought of rules. See below on how to lift after surgery.*

“When can I shower/bath again?”

You can shower from day 1 with the dressing in place. Just pat the dressing dry. To have a bath or swim the wound needs to be healed and dry (typically once all the dressings have come off after 12 days).

“When can I play sport?”

Sport enthusiasts should expect to return to exercise carefully from 2 weeks after surgery. It is best to try aerobic exercise first, such as running, swimming and exercise classes first and for a smaller distance or duration than you usually managed. Build it up again as comfort allows. Cycling can be uncomfortable for several weeks. The more comfortable your saddle the sooner you will be able to ride. Patients that have had umbilical hernia surgery can often cycle on flat ground

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from week 2. You can swim in a pool or the sea when the wound is clean and dry. This is usually when you take your dressing off on day 12.

Feedback from previous patients suggests the following timelines are comfortable for specific activities at a non-competitive intensity:

- Running – 4 weeks
- Driving – 2 weeks
- Swimming – 2 weeks
- Golf – 5-6 weeks
- Sailing (yachts) 4-6 weeks
- Cycling – 2 weeks ventral hernias, 4-6 weeks groin hernias
- Hiking 2-4 weeks (depends on distance and elevation)

“When can I start heavier lifting?”

DO NOT lift weights (more than a 5kg bag of shopping in each hand) for a minimum of 8 weeks. If lifting weights, start with light weights that are comfortable and increase the number of repetitions before lifting heavy weights at a low repetition.

“How to lift after surgery”

As mentioned above a workplace manual handling course tells you how to do this. But the key principles are:

- Squat down and lift using your legs. DO NOT bend forward to lift with your back. This put a lot of additional pressure on your core/trunk. Lifting with your legs reduces the force in your abdomen needed to lift.
- Keep the object being lifted close to your trunk with a straight back.
- Try not to twist your trunk as you lift or reach over to lift, even a light weight.

In short, try and use common sense and follow the key rules for the best outcome.

Please be patient with your body. It feels traumatized and weak for a reason – It is! The surgery repairs the hernia defect and places a mesh to encourage the body to generate firm new connective tissue. This seals the repair and strengthens the



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tissues in the area. Initially after surgery your body has not done this yet, and the repair is very weak. By about 3 months it has nearly all its final strength back so greater activity is possible. It takes up to 12 months for the modelling of this scar tissue to finish and final maximal strength to be achieved. In the first 4 weeks there is very little strength, and you can damage your repair if you ignore the bodies warning signs of discomfort and tiredness when you've done too much. Please follow our web page on wound healing if you want to understand this process better to guide you in your recovery.

If you are trying to return to a very high level of activity/sport it will take longer to get back to your old ways. - Slowly introducing aerobic and conditioning exercises will improve your recovery and reduce the risk of recurrence whether you just want to walk to the shops or compete in ultramarathons.



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Follow Up

You will have a follow up after 4-6 weeks once recovered. My office will email you around 3.5 weeks after surgery and you can decide at that point if you want a face-to-face appointment, or a telephone call based on how you are feeling your recovery is going. We are happy to offer either at your preference.

If you need to be seen before this then please contact us, or the hospital you were treated at if urgent, to arrange an earlier review. If you have other questions in the meantime, please contact us and we will get back to you asap.

How to prevent a hernia from re-occurring

- Be careful and mindful of how you feel and what you are hoping to do and achieve.
- If you smoke, make this an opportunity to stop. Smoking causes weak connective tissue, and the repair will never be as strong as it should be.
- If you have a BMI >25, use this opportunity to try and lose weight. Excess weight adds pressure on the repair especially when abdominal pressure is increased. The higher your BMI the more this applies. (The increasing risk is an exponential rather than a linear curve – the excess risk with a BMI of 30 is substantially more than the excess risk of a BMI of 27 for example.)
- If you cough, sneeze or laugh hold the repair with your hand to help support it. If you find the hernia support briefs comfortable continue to use them without the padding.
- Start a core muscle (core muscles are the abdomen, sides, lower back, buttocks and hamstrings) exercise program. Aerobic exercises, Yoga, Pilates and Tai Chi are excellent ways to start this.



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As a patient of the Hernia Clinic Hampshire, you are in the best possible care, but it is ultimately up to you as to how much you follow our post-surgery advice and information. Your recovery will be affected by how closely you follow this guide.

All the information you need to make an informed choice about hernia surgery is within '[Hernia Surgery](#)' section of our website.

If after reading this a couple of times you still have questions, please email them to us prior to your surgery so we can answer them and make sure you are comfortable with and understand what you are agreeing to and why.