

Post Surgery Rehabilitation

Below is a suggested mobilisation programme to help you recover after your laparoscopic groin hernia surgery. It is important to wear underwear that will provide good support for at least two weeks after surgery (avoid boxer shorts) and also please try to maintain a good healthy and high fibre diet to avoid becoming constipated.

Mobilisation

Days 1-5:

Gentle walking, increasing every day, may need to continue taking pain killers (paracetamol).

Week 1

Simple stretching of legs, knees and hips, increase in movements and walking.

Week 2

Increase in walking further, simple light exercises such as gentle swimming is suggested if wound is healed at the end of the second week.

If an emergency stop is possible with relative little pain or discomfort then driving can commence (two weeks for most patients) – please make sure that you are not on any strong painkillers as these may make you feel drowsy.

Week 3

You should now be able to walk fully without much pain. Light exercises can be increased; short distance cycling can be undertaken. Gentle running or fast walking can commence with continued stretching exercises for the hips, knees and abdominal walls. Further advice from a chartered physiotherapist can be sought if required.

Week 4

Running can be commenced; driving should not be problematic now. Heavy lifting can be commenced after the end of week 4. Pain in the groin area should be minimal.

After 3-4 weeks

Recovery should be complete.

This information is to be used only as advice. Your surgeon may advise you on any further specific advice that you may require. For any more information on your surgery or condition please visit the following webpages

www.manchestergeneralsurgery.co.uk

www.manchesterherniaclinic.com

Call us on: 0161 495 6149

Open Inguinal Hernia Repair



Professor Aali J Sheen

You have recently undergone surgery on your groin hernia under the care of Professor Sheen

To aid in your recovery some simple advice is laid out below with respect to wound care and importantly what you can and cannot do after your operation.

Wound care

You will have a groin incision (either one or both sides) covered with a dressing called Mepore® (Molnlycke). Mepore dressing is designed to be air-permeable, comfortable and generally provides a considerably reduced risk of allergic reactions. The Mepore dressing is specially designed not to 'stick' to your wound but adhere only to the surrounding skin so that it can be removed without causing too much discomfort. Please advise your surgeon or nurse if you have experienced any allergic reactions to such dressings in the past so that an alternative dressing can be used for your wounds.

You may also find that you have no dressing and instead the wound is covered with a tissue glue which is hypoallergenic and in two days should also be waterproof. This will stay on for at least 2-3 weeks and eventually just fall away by itself.

All the wounds are closed using a dissolvable suture, therefore no sutures (stiches) are required to be removed unless specifically stated.

A dressing is required for your wound for at least 7 days after surgery. If the dressing is removed, becomes wet or falls off, you are advised to reapply another dressing which should remain for up to 7-10 days. You can shower after at least three days, but do not rub soap into your wound and ensure that your wound is kept dry and clean.

You can take a bath or go swimming at least two weeks after surgery.

The wound may be red after a few days and swell. This is part of the normal healing process and you should continue to carefully monitor your wound.

Your wound must be kept dry.

Pain

Some patients describe wound pain. Although you have undergone surgery and may experience some pain, it is important to inspect the wounds and look for other factors, which may be the cause for the pain including bleeding or redness, indicating a possible infection and a yellow coloured discharge which could also indicate a possible infection.

Redness

This can generally represent a simple irritation but if the redness continues then you should consult the hospital ward, your GP surgery or make an appointment to see Mr Sheen in his next available clinic.

If either pain or redness should occur and you are not able to contact your GP surgery or the hospital where you had your operation for advice and you are sufficiently concerned, then you are advised to report to your local A&E department.

Stitch/Suture material

Sometimes suture material can be seen protruding, particularly at the ends of the wound. This can usually occur after a few weeks when the wound is almost healed and will usually 'fall' away by itself. If the protruding suture material persists then your GP practice nurse may be able, if possible, to remove it for you or it can be removed by Mr Sheen in his out-patient clinic.

Bruising

This is usually noticed both over the wounds, the groin area and scrotum (in men). Also in men some scrotal swelling or fluid is noted. If bruising occurs then you should not worry as this will settle with time.

