

Hernia repair surgery pre-op

Days before surgery

Medication and supplements

- Some medication will need to be withheld before surgery.
- Bring your regular medications in their original packaging to the hospital, and follow instructions on which ones to take on the day of surgery.

Special considerations

- Notify us if you develop a cough, infection, or any change in health in the week before surgery.
- Arrange help at home for the first few days after surgery, especially for transportation, meals, and household tasks.
- Plan not to drive for a week after surgery, so, arrange for transport and assistance as needed.
- It is normal to feel anxious. Bring something to help you relax, such as headphones, music, or a book.

1 The day before surgery

- Shower or bathe the night before or morning of surgery.
- Do not shave the surgical area; this will be done by the surgical team if needed.
- Eat a light meal the evening before and avoid alcohol after 8pm.
- Do not eat or drink anything after midnight unless instructed otherwise (some medications may be taken with a sip of water).

2 The day of surgery

- Remove all jewellery, piercings, make-up, and nail polish before coming to the hospital.
- Wear comfortable clothing and bring any hearing aids or glasses you may need.
- You may wish to bring a friend or family member to accompany you, and drive you home.
- Arrive at the hospital at the specified time and bring all necessary paperwork and identification.

When do I arrive?

You will be required to arrive at hospital a few hours before surgery so that the hospital staff can be prepared for the operation.

If you have a **morning** operation, arrive at the hospital at 7am. Do not have any food or drink after midnight prior (do not have breakfast).

If you have an **afternoon** operation, arrive at the hospital at 11am. Have your last Optifast no later than 8am and drink only water until 10am. Do not have anything after 10am.

Hernia repair surgery post-op

General recovery timeline

- **First week:** Focus on rest, wound care, and gentle movement.
- **Two to four weeks:** Gradually return to full activities.
- **Four to six weeks:** Most patients can resume normal activities.

Wound care

- Your wounds will usually have dissolving stitches and will be covered in a waterproof dressing. Keep your wound dry for the first 24 to 48 hours. After this period, you may shower, but avoid submerging the incision in water (baths, swimming) for 2 weeks.
- Inspect the dressing after showering. The waterproof dressing may become wet or loose. If this happens, you may remove it, but try not to disturb the sticky plaster dressing underneath, which is adhered to the wound. This plaster normally falls off after about 2 weeks.
- Do not apply ointments, antiseptics, or powders to the incision. Simply keep it clean and dry.
- Monitor for signs of infection: Notify your surgical team if you notice excessive redness, drainage, swelling, or increasing pain at the incision site.

Pain relief

Take prescribed pain medication as directed. It's normal to require this for the first 3 to 5 days. There are three levels of pain relief in increasing strength.

Paracetamol 500mg tablets.

Two tablets every 4 hours for a maximum of 8 tablets in 24 hours. Most patients take these regularly for the first 3 days.

NSAIDs

There are a variety of these, and they are often used in the first 3 to 5 days in conjunction with Paracetamol:

- **Voltaren 75mg SR**
One tablet twice a day **OR**
- **Celecoxib 200mg**
One tablet twice a day **OR**
- **Brufen 400mg**
Every 6 hours with a maximum of 2400mg in 24 hours.

Opiates

These are the strongest pain relief, and the dose will vary with each patient. Patients take these intermittently when the pain breaks through the other two levels. Common medications in this class are Codeine, Tramadol, and Oxycodone.

Some people get relief from ice packs on the surgical area for 20 to 30 minutes, several times a day, during the first few days to reduce swelling and discomfort.

Supportive underwear (for groin hernias). Some people get relief by wearing a pair of brief-type underwear

Hernia repair surgery post-op

Activity and mobility

- **Early movement is encouraged:** Get up and walk as soon as you are able, even on the day of surgery. Walking helps prevent blood clots, improves breathing, and speeds up recovery.
- **Avoid strenuous activities and heavy lifting for at least 2 weeks:** An easy rule of thumb is to avoid exercising faster than walking pace and not lift anything heavier than a plate of food for 2 weeks.
- **No absolute bed rest is needed:** Staying active helps your recovery.
- **Driving:** You may resume driving when you can perform an emergency stop without pain, usually after 3 to 5 days.

Bowel Care

Constipation is common after hernia surgery. Use over-the-counter laxatives (e.g., Metamucil, Lactulose, Coloxyl) if needed, and do not hesitate to take them preventively for the first few days. Stay hydrated and eat foods high in fibre to help prevent constipation.

Nausea

Some patients will remain nauseated for a few days after surgery. This is usually related to the analgesia and eases once it is stopped. However sometimes antiemetics such as Ondansetron are required.

Diet

No strict dietary restrictions are needed.

Medications

Take your medications exactly as prescribed on your medication discharge instruction sheet.

Unless otherwise directed by your doctor, all of your medications and vitamins can be swallowed as they are given. Alternatively you may crush tablets, use chewable or liquid forms. If you are uncertain how large a pill you can swallow then it is useful to use the rule that you swallow no pill larger than the top of a thumbtack.

Usual post-op medications are:

- Paracetamol 1g gelcap orally every 4hrs for pain (cut pills in half if difficult to swallow).
- Celecoxib 200mg caps twice a day for pain.
- Codeine or tramadol as prescribed for pain.
- Pantoprazole 20mg gelcap orally once a day for 12 months.
- Laxsol tablets for constipation.
- Ondansetron 4mg tabs or wafers every 4-6 hours for nausea.

Return to work

This depends on the type of work involved. People in desk jobs can usually return to work within a week. Those in heavy labouring jobs will need at least two weeks.

When to seek medical advice

Contact Dr Flint at the rooms or your GP if you experience:

- Fever above 38°C.
- Increasing redness, swelling, or drainage from the incision.
- Severe or worsening pain not relieved by medication.
- An enlarging lump at the site of surgery.

Richard Flint Surgery Rooms | P. 03 375 4480