



Preparing for a hernia repair

What is a hernia?

A hernia is a lump that forms when fatty tissue or part of your intestine (gut) pushes through a weakness in the muscle wall of your abdomen or top of your thigh. Often, it will only appear when you're lifting something, straining or coughing. It may disappear when you lie down.

Depending on the type and size of your hernia, you may be offered:

- **open surgery** – involves a single cut in the skin through which the surgeon can push back the lump into the abdomen then repair the muscle weakness
- **laparoscopic (keyhole) surgery** – uses small instruments to repair the hernia from inside. This means you just have two or three smaller cuts and you will often recover more quickly.

What type of anaesthetic will I have?

Depending on the type of surgery and any medical conditions you have, you may be offered:

- **a general anaesthetic** – anaesthetic drugs make you unconscious, so you are completely unaware throughout your operation
- **a spinal anaesthetic** – the lower half of your body is numbed by an injection in your lower back
- **local anaesthetic** – injections and/or nerve blocks to numb the area
- you may also be offered some **sedation** (medicine to relax you).

The anaesthetist will discuss with you the best options for you based on your health, age and type of surgery required.

How long will I be in hospital for?





You should usually be able to go home the same day.

Before the operation

- Consider what you can do to improve your health before the operation. Stopping smoking, reducing alcohol consumption, eating more healthily and exercising have all been shown to help patients recover more quickly after surgery. Ask your GP practice about lifestyle support available to you.



Preparing for surgery | Hernia repair

- If you have existing medical conditions (eg diabetes, high blood pressure, chest or heart disease) check with your GP well ahead of your surgery that your medication is up to date and as effective as it can be. This can help prevent delays to your surgery and give you the best chance of your operation and recovery going well. 
- You should take your normal medication to the hospital with you. The staff will advise you on how to take it on the day of the operation. Check you have enough to last you during your recovery.
- Remember to wear any hearing aids and take some spare batteries.
- It is normal to feel anxious about an operation. To help you relax before and after your surgery think about bringing some headphones and music with you, or something to read. Consider learning some breathing exercises or relaxation techniques.
- On the morning of surgery (or evening before) you should have a bath or shower before going to the hospital, as this helps to reduce the risk of infection. 
- Do not shave the hernia area yourself – the surgical team will do this for you.
- The hospital will advise you on when to stop drinking and eating (the day of the operation). If you drink plenty of water before this time, you will certainly feel better and may even reduce complications.
- Make sure you have some over-the-counter painkillers available at home. The hospital will advise you on how to take these.
- You should arrange for an able-bodied adult to take you home and be with you the first night at home after surgery if possible. This is essential if you have had sedation or a general anaesthetic. If you have others you care for, you should arrange appropriate help for them too.
- You won't be able to drive for a few weeks so you might want to make arrangements with a friend or relative to help you get around. 
- It might help to plan some easy-to-prepare meals for when you come home after your operation.
- You will usually need to plan to take two to three weeks off work, but if you have a physical job you may need up to six weeks off. 

After the operation

- You may feel drowsy or unsteady immediately after surgery, but most people recover quickly.
- You will have a dressing over your wound. You may have some swelling, bruising and pain around the operation site for a few days.

Research has shown that on the first day after hernia surgery:*



2 in 3
patients reported
feeling drowsy



3 in 4
patients reported
feeling thirsty



2 in 3
patients had moderate
to severe pain

*Walker EMK et al. Patient reported outcome of adult perioperative anaesthesia in the United Kingdom: a cross-sectional observational study. *Br J Anaesth* 2016;**117**:758–766.

Recovering at home

- Your surgical team will give instructions about your dressings. You should try and keep the dressing as clean and dry as possible. If your wound is covered by a waterproof dressing, you can shower.
- If you have non-dissolvable stitches or staples, you will need to make an appointment with a nurse at your GP surgery to have them removed after a week or so.
- You should take regular pain relief as advised by your hospital.
- If you need to cough or sneeze apply a little pressure with your hand over the wound to support it.
- Eat a good diet with plenty of fruit and fibre and make sure you drink enough water (up to 2 litres per day) to avoid constipation. It may be useful to take laxatives if you become constipated.
- You should avoid heavy lifting and straining, but it is important to walk around and stand up straight. Don't worry if you feel pulling around your stitches.
- If you are not very active, wear your compression stockings and do gentle leg exercises to reduce your risk of blood clots.
- Many people can return to work and light exercise within two weeks after surgery. The hospital will give you a fit (sick) note to cover you for this period – check you have this before you leave hospital. Most people make a full recovery within six weeks.
- You should not drive until you feel able to do so safely and without pain and are able to stop the car in an emergency. You should let your insurance company know before you start driving again.



Things to look out for at home

You should contact your GP or the hospital where you had your surgery if:

- your wound becomes more painful, red, swollen or feels hot to the touch
- you notice fluid leaking from your wound
- you feel unwell or develop a fever over 38°C or vomiting
- your lower legs become swollen and painful.

These symptoms may occur if you have developed an infection and may need further treatment, usually with antibiotics.

If you feel very unwell you should go to your nearest accident and emergency department as soon as possible.

Additional resources available online

Royal College of Anaesthetists

- Preparing for surgery: Fitter Better Sooner toolkit and animation (rcoa.ac.uk/fitterbettersooner)
- You and your anaesthetic and Your spinal anaesthetic (rcoa.ac.uk/patientinfo/leaflets-video-resources)
- Caring for someone who has had a general anaesthetic or sedation (rcoa.ac.uk/patientinfo/sedation)
- Risks associated with your anaesthetic (rcoa.ac.uk/patientinfo/risks)
- Patient information series (rcoa.ac.uk/patientinfo/leaflets-video-resources)

Royal College of Surgeons of England

- Recovery tracker (<http://bit.ly/2LAJKW9>)
- Groin hernia repair (<http://bit.ly/2LAJVkh>)

NHS Choices

- Inguinal hernia repair (nhs.uk/conditions/inguinal-hernia-repair)

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We try very hard to keep the information in this leaflet accurate and up-to-date, but we cannot guarantee this. We don't expect this general information to cover all the questions you might have or to deal with everything that might be important to you. You should discuss your choices and any worries you have with your medical team, using this leaflet as a guide. This leaflet on its own should not be treated as advice. It cannot be used for any commercial or business purpose.

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Tell us what you think

We welcome suggestions to improve this leaflet.

If you have any comments that you would like to make, please email them to:

patientinformation@rcoa.ac.uk

This leaflet has been reviewed by the RCoA Patient Information Group (which includes lay members) and by the RCoA Professional Standards Advisory Group.

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