

*Mr Paras Jethwa BSc MD FRCS
Consultant Laparoscopic Surgeon
Spire and North Downs Hospital*

Patient Information for Laparoscopic Inguinal Hernia Repair (TEP)

About Your Inguinal (Groin) Hernia and Laparoscopic Repair:

What Is an Inguinal Hernia?

- A hernia occurs when the inside layers of the abdominal muscle have weakened, resulting in a bulge or tear. In the same way that an inner tube pushes through a damaged tire, the inner lining of the abdomen pushes through the weakened area of the abdominal wall to form a small balloon-like sac. This can allow a loop of intestine or abdominal tissue to push into the sac. The hernia can cause severe pain and other potentially serious problems that could require emergency surgery.
- Both men and women can get a hernia, though it is much more common in men.
- You may be born with a hernia (congenital) or develop one over time.
- A hernia does not get better over time, nor will it go away by itself.
-

How Do you Know If you have an Inguinal Hernia?

- The common areas where hernias occur are in the groin (inguinal), belly button (umbilical), and the site of a previous operation (incisional).
- It is usually easy to recognize a hernia. You may notice a bulge under the skin. You may feel pain when you lift heavy objects, cough, strain during urination or bowel movements, or during prolonged standing or sitting.
- The pain may be sharp and immediate or a dull ache that gets worse toward the end of the day.
- Severe, continuous pain, redness, and tenderness are signs that the hernia may be entrapped or strangulated. These symptoms are cause for concern and immediate contact of your GP, local A&E or surgeon.

What Causes a Hernia?

The wall of the abdomen has natural areas of potential weakness. Hernias can develop at these or other areas due to heavy strain on the abdominal wall, aging, injury, an old incision or a weakness present from birth. Anyone can develop a hernia at any age. Most hernias in children are congenital. In adults, a natural weakness or strain from heavy lifting, persistent coughing, difficulty with bowel movements or urination can cause the abdominal wall to weaken or separate.

What Are the Advantages of Laparoscopic Hernia Repair?

Laparoscopic Hernia Repair is a technique to fix tears in the abdominal wall (muscle) using small incisions, telescopes and a mesh. Laparoscopic repair is associated with a faster return to normal activity and a reduction in longterm discomfort in the majority of patients when compared to traditional open repairs.

What Preparation is Required?

- Most repairs can be performed as a daycase procedure, and therefore the you will probably go home on the same day that the operation is performed.
- Preoperative preparation includes blood work, medical evaluation, chest x-ray and an ECG depending on your age and medical condition.
- Before the operation and in the clinic you will need to provide written consent for surgery.
- It is recommended that you shower the night before or morning of the operation.
- If you have difficulties moving your bowels, an enema or similar preparation may be used after consulting with your surgeon.
- You can drink water/black tea/coffee/clear apple juice until 2 hours before the operation but need to stop eating before 6 hours before the planned time of surgery. Do ensure that you take your normal medication with a sip of water the morning of surgery.
- Drugs such as aspirin, blood thinners, anti-inflammatory medications (arthritis medications) and Vitamin E will need to be stopped temporarily for several days to a week prior to surgery.
- Diet medication or St. John's Wort should not be used for the two weeks prior to surgery.
- Quit smoking and arrange for any help you may need at home.

Are you suitable for Laparoscopic Hernia Repair?

Only after a complete examination can your suitability be established. The procedure may not be best for some patients who have had previous abdominal surgery or those with underlying medical conditions. I practice very few patients are **not suitable**. It always requires a general anaesthetic.

How Is Laparoscopic Hernia Repair Performed?

There are few options available for a patient who has a hernia.

- Use of a truss (hernia belt) is rarely prescribed as it is usually ineffective.
- Most hernias require a surgical procedure.
- Surgical procedures are done in one of two fashions.
-

I. The open approach is done from the outside through a three to four inch incision in the groin or the area of the hernia. The incision will extend through the skin, subcutaneous fat, and allow the defect to be repaired and a mesh inserted to provide longterm strength. This technique can be performed with a local or general anaesthetic but may be performed using a spinal anesthetic. Longterm results from open repair have shown very good outcomes though the incidence of chronic pain is greater than that seen with a laparoscopic repair.

II. A laparoscopic hernia repair. In this approach, a laparoscope (a 1cm telescope) connected to a special camera is inserted through a cannula, a small hollow tube, allowing the surgeon to view the hernia and surrounding tissue on a video screen.

Other cannulas are inserted which allow your surgeon to work “inside.” One or two 1 cm incisions are usually necessary. The hernia is repaired from behind the abdominal wall. A small piece of surgical mesh is placed over the hernia defect and, in some cases held in place with small surgical staples or glue.

The operation can be fully discussed in clinic together with relevant videos and pictures.

What Should I Expect After Laparoscopic Surgery?

- Following the operation, you will be transferred to the recovery room where you will be monitored for 1-2 hours until you are fully awake.
- Once you are awake and able to walk, you will be able to go home (as long as you can pass urine).
- With any hernia operation, you can expect some soreness mostly during the first 24 to 48 hours.
- You are encouraged to be up and about the day after surgery.
- With laparoscopic hernia repair, you will probably be able to get back to your normal activities within a short amount of time. These activities include showering, driving, walking up stairs, lifting, working and engaging in sexual intercourse.
- Call and schedule a follow-up appointment within 2 weeks after you operation.

What Complications Can Occur?

- Any operation may be associated with complications. The primary complications of any operation are bleeding and infection, which are uncommon with laparoscopic hernia repair.
- There is a slight risk of injury to the urinary bladder, the intestines, blood vessels, nerves or the sperm tube going to the testicle.
- Difficulty urinating after surgery is not unusual and may require a temporary tube into the urinary bladder for as long as one week.
- Any time a hernia is repaired it can come back. This long-term recurrence rate is not yet known but estimated at no more than 2% in your lifetime.