

Post Operative Instructions for Umbilical Hernia Repair

Description of procedure:

An Umbilical Hernia results in a defect in the anterior abdominal wall surrounding the area of the umbilicus or the belly button. Patients note a bulge at the base of the umbilicus or surrounding the umbilicus that is often times painful and sometimes will fall back into the abdomen as the patient reclines. This hernia is generally repaired when it becomes symptomatic or causes pain. Or, to decrease the chance of incarceration or strangulation where the intra abdominal contents protrude through this abdominal wall defect causing obstruction of the bowel and subsequent potential bowel death. The hernia is repaired by making a small incision curved around the belly button. Any intra-abdominal contents that are stuck within the abdominal wall defect are replaced back into the abdominal cavity. The hernia defect is then closed with a piece of mesh. The abdominal wall is closed with non-absorbable sutures over the top of the mesh. The subcutaneous tissue and skin are then closed with absorbable sutures.

Post operative pain control:

Post operative pain following an umbilical hernia repair is generally moderate. Usually narcotic pain medication is required for the first week. Most patients do not need narcotics after the first week of surgery. The pain control can be supplemented using anti-inflammatory medication such as Motrin® or Advil® taken up to 3 times daily with meals.

Common findings a patient may note on physical exam after the surgery; Bruising at the site the first several days after surgery can look very much like an infection as it extends in a circular area often times inferior to the belly button. With time this redness will turn black and blue more consistent with a bruise. Patients will also note swelling in the umbilical hernia site and tenderness near the incision, and thickening directly beneath the incision.

Common things to watch for after surgery:

- #1. **Infection.** Redness around the belly button that does not turn into bruising, but increases in diameter and red color with heat increasing associated with worsening tenderness or drainage from the belly button. If noted, your surgeon should be called immediately. At times your surgeon may ask you to draw a line along the margin of the redness to see if this is infection that would extend beyond the line or bruising which would stay within the line.
- #2. **Fluid collection.** At times after umbilical hernia surgery collection of inflammatory fluid will accumulate beneath the wound. This may cause intense swelling perhaps some drainage of clear fluid and tenderness. This can easily be taken care of by aspirating the fluid out of the wound in the surgeon's office.
- #3. **Constipation.** Narcotic pain medication commonly causes constipation in postoperative patients. It is almost always appropriate to take a stool softener such as Colace® once in the morning and once at night in order to lessen the effects of constipation from the narcotics. Should you still be constipated after surgery a Dicolax® suppository, which can be obtained over the counter, can be used once in the morning and once at night as needed to produce a bowel movement. Some patients also find benefit from using milk of magnesia 30cc by mouth in the morning and at night until bowel movements resume. Should these over the counter medications be inadequate to produce normal bowel movements please call your doctor to receive additional instructions.

Post operative restrictions:

- #1. Heavy lifting, strenuous activities and exercise should be avoided 3 weeks from the time of surgery; however, normal activities such as office type work or house hold responsibilities can be resumed 1 week following surgery. Shortly after the surgery walking, going up and down stairs, going to the bathroom and going to the kitchen table are all appropriate activities.
- #2. The wound should remain dry for 48 hours. You should avoid immersing the wound in a bath, swimming pool or a hot tub until your post-operative visit 7 to 10 days following surgery. There are no dietary restrictions after hernia surgery, after the initial nausea has resolved following anesthesia.

Follow up:

You should call your surgeon's office any time you have questions regarding your surgery. A routine follow up visit is made 7 to 10 days following the surgery. Call the office to schedule your follow up appointment convenient to your schedule. You may be asked to schedule a 6-week appointment following your surgery for a final postoperative visit.