

## What should you expect after your surgery?

- Following the operation, you will be transferred to the recovery room where you will be monitored until you are fully awake
- Once you are awake and able to pass urine and walk, you will be discharged
- After discharge, you will be seen in the clinic
- With any hernia operation, you can expect some soreness mostly during the first week
- With Laparoscopic Hernia Repair, you will be able to get back to your normal activities within a shorter time
- Avoid activities that require straining such as weight lifting for at least the first 2 weeks after surgery
- You are recommended to wear an abdominal binder for at least 4 weeks after the surgery

## What complications can occur?



Any operation may be associated with complications including:

- Bleeding and infection
- Slight risk of injury to the urinary bladder, intestines, blood vessels or nerves
- Difficulty urinating after surgery is not unusual and a temporary tube may be inserted into the urinary bladder
- Possible recurrence of a hernia
- Collection of fluid at the site of the hernia (seroma), resulting in conversion to open surgery in cases of laparoscopy

## When to call your doctor?

Please call your physician or surgeon if you develop any of the following:

- Persistent fever over 38.5 degrees celsius
- Bleeding
- Increasing abdominal pain
- Pain that is not relieved by medications
- Persistent nausea or vomiting
- Inability to urinate
- Chills
- Persistent cough or shortness of breath
- Purulent drainage (pus) from any incision
- Redness surrounding any of your incisions that is worsening or getting bigger
- Inability to eat or drink

**University Surgical Centre (USC)**  
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Appointment Line: (65) 6772 5083

Opening Hours:  
Monday to Friday: 8:30am - 5:30pm  
Closed on Sat, Sun & Public Holidays



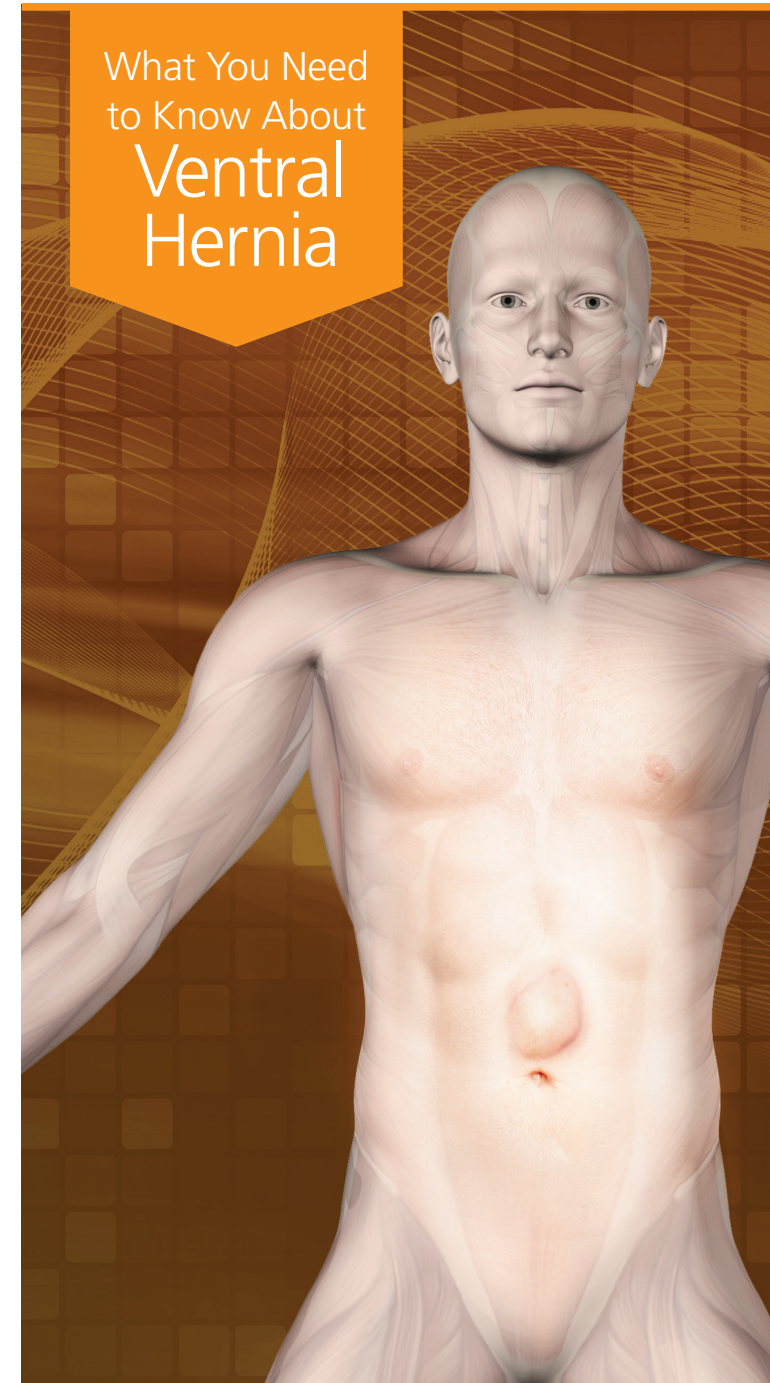
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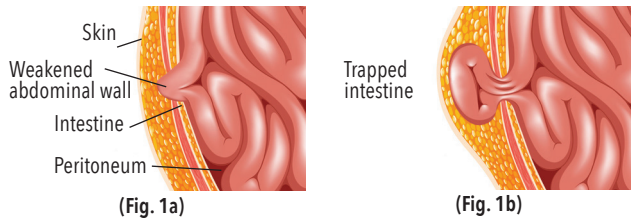
## What You Need to Know About Ventral Hernia



## What is a hernia?

A hernia is a bulge in the abdomen resulting from weakness of the abdominal wall layers. It may contain a loop of intestine or abdominal fat.

The hernia can cause severe pain and other complications that could require an emergency surgery. Both men and women can get a hernia.



## What is a ventral hernia?

Ventral hernia usually arises at areas of weakness in the abdominal wall or where a previous surgical incision was made. In this area, the abdominal muscles have weakened and this results in a bulge or a tear.

Ventral hernias can be found at the belly button (umbilicus) or any other areas of the abdominal wall (Fig. 2).



## How do you know if you have a hernia?

Some of the symptoms include:

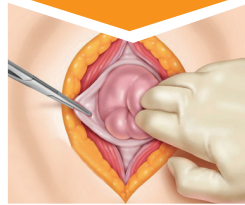
- A bulge under the skin
- Experiencing pain when lifting heavy objects, coughing, straining during urination or bowel movements, or with prolonged standing or sitting
- Any continuous or severe discomfort, redness, nausea or vomiting associated with the bulge are signs that the hernia may be entrapped or strangulated

## How is it treated?

The use of an abdominal wall binder (Fig. 3) is occasionally prescribed, but often ineffective. Therefore, either open ventral hernia surgery or laparoscopic (keyhole) surgery is the preferred treatment. The surgical repair is done under general anaesthesia.



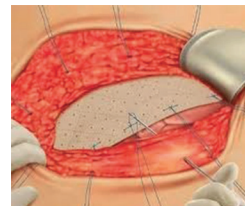
## Open Ventral Hernia Surgery



Your doctor makes an incision in your abdomen where the hernia is located and the hernia content is placed back into the abdominal cavity.

The hernia is then repaired in one of the two ways:

**Primary repair** - This repair involves sewing the abdominal wall tissues back together with sutures (Fig. 4a).



**Mesh repair** - A surgical prosthesis (mesh) is used to cover and overlap the hernia defect, then secured with sutures (Fig. 4b), thereby strengthening it.

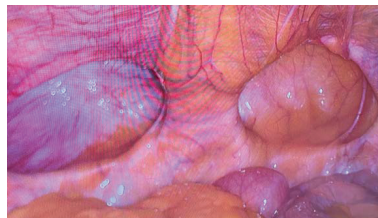
## Laparoscopic Surgery



Surgical instruments and a laparoscope (tiny camera) are inserted through small incisions into the abdomen (Fig. 5a). The contents of the hernia sac are reduced into the abdominal cavity.

A surgical prosthesis (mesh) is used to cover the hernia defect and it is held in place with surgical staples and/or sutures (Fig. 5b and c).

This operation is usually performed under general anaesthesia.



## Are you suitable for Laparoscopic Hernia Repair?

Your surgeon will determine whether a laparoscopic or open ventral hernia repair is suitable for you after a thorough examination.

## What are the advantages of Laparoscopic Hernia Repair?

Results may vary depending on the type of procedure and each patient's overall condition.

Advantages of this procedure:

- Less post-operative pain
- Shorter hospital stay
- Faster return to regular diet
- Quicker return to normal activity
- Improved physical appearance



## What preparation is required?

Depending on your age and medical conditions, pre-operative preparations include:

- Blood tests
- Chest X-rays
- Electrocardiogram (ECG)

You are also advised on the following:

- Shower the night before or morning of the operation
- Fast the night before the operation from 12am, but continue to take the medications that are permitted by your surgeon
- Drugs such as aspirin, blood thinners, anti-inflammatory medications (arthritis medications) and Vitamin E may need to be stopped temporarily for a week prior to surgery
- Quit smoking and arrange for any help you may need at home