

Umbilical Hernia Repair

What is an umbilical hernia?

A hernia is caused by a weakness in the muscles of the abdomen. You may have felt pain in the area around the umbilicus (tummy button) or have noticed a lump appearing from time to time. The lump, if present, is due to a small part of your abdominal contents coming out through the weak area. An operation to strengthen the weak muscle is usually necessary to relieve symptoms and to reduce the risk of a piece of bowel getting stuck in the hernia.

What will my operation involve?

Several operations have been used in the past. These involved placing deep stitches in the muscles of the abdominal wall. Whilst they can be effective operations they often result in considerable discomfort in the early days after operation and can limit your ability to work/ resume normal activities for some weeks.

You will be offered an operation that involves placing a piece of strong nylon mesh material over the weakened area. This is a well established operation which has been shown to reduce considerably the discomfort felt by patients in the early days after their operation. You should find that you are able to resume normal activities quite soon after you leave hospital. The standard operation involves a cut under the umbilicus of approximately 4-5 cm. A piece of nylon mesh will be stitched in place over the weak area. The cut in the skin will be closed with dissolvable stitches or staples.

Shaving

The operation site needs to be shaved. You will be shown exactly where to shave the skin when you arrive on the ward.

Pain

Immediately after surgery pain relief will be provided either by injections, tablets or pain killing suppositories. It is unlikely that you will need strong painkillers for more than 24-48 hours after surgery and after 5-7 days you should be able to discontinue them altogether. You may experience some tightness or discomfort in the wound for some weeks. This usually settles with time.

The wound

If dissolvable stitches are used they do not need to be removed. If staples are used they will

be removed after approximately 7 days. Be sure to check which method of skin closure has been used before you leave hospital. It is usual to have some thickening under the wound. This is scar tissue and will soften up within a few months. The scar will be red to begin with but will fade with time to leave a thin white line. You may notice bruising around the wound. This is common and will settle quite quickly, although it may delay your recovery a little.

Many patients experience odd sensations in the few months following a hernia repair. These are often described as dragging or pulling sensations and are thought to be related to the healing process. If they do occur they will gradually settle within a few months of operation. .

What can I do after the operation?

The wound is waterproof after 4-5 days and a bath or shower can be taken after this time. The dressing can be soaked off in the bath after 7 days and there should be no need to replace it. Normal activities and work can be resumed as soon as the wound is comfortable. This will normally be within 2 weeks of your operation. It is sensible to avoid any heavy lifting or strenuous sport (e.g.. football) for 4 weeks. Light exercise (e.g.. swimming, golf) may be resumed as soon as the wound is comfortable. If you undertake any activity that gives you discomfort you should stop this for a few days and then try again. You should not drive for a few days after your operation. The effects of the anaesthetic linger on and your reaction times are slower than normal. Make sure you can brake hard without discomfort before taking the car on the road. If you are in any doubt as to when to resume driving, check with your insurance company.

What can go wrong?

All operations can result in complications. Fortunately these are rare following an umbilical hernia repair. Infection can occur in the wound and will show itself as redness and swelling around the scar. There may be a discharge of fluid or pus. If you notice any of these signs consult your GP who may need to give you antibiotics. A rare complication is infection deep within the wound. If this does not respond to antibiotics the wound may need to be re-opened and very occasionally the mesh may need to be removed.

Many patients ask if the hernia will return in the future. Recurrence of the hernia following the type of repair that you have had is unusual.

Would my hernia be suitable for keyhole surgery?

Although it is possible to repair an umbilical hernia in this way there is little point as the conventional repair only involves a very small cut and recovery would be no quicker using keyhole techniques. This is in contrast to groin (inguinal) hernias where there are often advantages to keyhole surgery.

Where can I get more information?

You can get more information by visiting the website below.