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Laparoscopic Hernia Repair

Laparoscopic Hernia Surgery

What is laparoscopic surgery?

This is when the operation is performed through a series of small cuts rather than a large cut.

What hernias can be repaired laparoscopically?

Most hernias can be repaired this way. Commonly inguinal, incisional and parastomal hernias are repaired laparoscopically.

What hernias cannot be repaired laparoscopically?

Some hernias are technically impossible to repair laparoscopically. Sometimes the hernia is too large or there are too many adhesions (scars) from previous surgery. Emergency operations are best performed as an open operation.

Some hernias are too small to repair laparoscopically. The incision required is small anyway and there is no benefit in doing more incisions that laparoscopic surgery would require e.g. umbilical hernia.

What are the benefits of laparoscopic surgery?

As there are smaller cuts there is less pain and the recovery is faster.

What are the complications of laparoscopic surgery?

The complications are the same as for open surgery but there are some specific complications related to laparoscopic surgery.

- **Damage to anatomical structures:** This can occur from the ports placed for the instruments. These ports have to be placed well away from the hernia and other organs can be damaged.
- **Complications from the gas:** To perform laparoscopic surgery carbon dioxide gas is used to create the operating space. Rarely this gas can escape into veins or the chest and cause serious complications.
- **Recurrence:** the recurrence rate is slightly higher after laparoscopic surgery
- **Conversion to open surgery:** This is not really a complication. Sometimes the procedure cannot be completed laparoscopically and open surgery is required.



What can I expect after the operation?

Most surgery is performed as a day only or very short stay in hospital. You will be able to walk immediately and climb stairs. You will require painkillers that you will be given in hospital.

When can I resume normal activities?

There will be no lifting allowed for 2 weeks. You can carry your plate and cup but not much more. After the initial 2 weeks there will be a further period of 2 weeks of light duties (no more than 5kg). These restrictions are to allow time for the mesh to secure into the muscle.

If you work at a desk without any lifting you can return to work in around a week. You can drive once you are no longer requiring strong (prescription) medication. If your work does involve lifting but has no light duties you will need the full 4 weeks off. Each patient's circumstances are different and certificates will be issued accordingly.

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