

Umbilical hernia repair

Introduction

We know that you are currently experiencing a long wait for your hernia operation and that this can be very difficult.

We have developed this advice and information to help support you whilst you wait. It is designed to help you manage your symptoms and condition and to prevent these from getting worse. It is also to help you prepare for your surgery.

This guide has been written by the national experts in hernia surgery and draws on the latest evidence and advice about how best to support people waiting for your procedure.

You can download and print this support guide and share with your family, friends and carers.

Guidance for Patients

Your surgeon has recommended that you have an umbilical hernia repair. This is the most effective treatment for your condition, but there are ways of managing your symptoms while you wait for surgery.

If your hernia is uncomfortable, you can take some simple painkillers such as paracetamol. If the hernia is stuck out, then you can lay down flat to allow the hernia to go back in. Some people find it helpful to gently massage the hernia to help it go back inside.

Light to moderate exercise is good for your general health and shouldn't make your hernia symptoms worse. Lifting heavy weights may make your hernia stick out and become more uncomfortable. It is best to avoid lifting anything heavy until you have recovered from surgery.

Getting ready for your operation

It is important while you are waiting for surgery that you keep as fit and healthy as you can. This will improve the success of surgery and reduce the chance that your operation is cancelled. Maintaining a balanced diet and a healthy weight can also help. The NHS lose weight resource also has lots of support available including a free 12-week weight loss plan.

Quitting smoking is one of the best things you can do for your general health, and it will also help you recover better from your operations, so can drinking less alcohol.

Exercise is important for health and if you can be more active then this can reduce the risks of surgery. Try to take a walk for at least 30 mins three times a week.

If you have diabetes, you need to take care to keep your blood sugar levels under control. If you are struggling, then please contact your practice nurse or diabetes nurse specialist for help. High blood pressure (or hypertension) increases the risks of surgery and is a common reason for cancelling planned operations. If you are over 50, it is good idea to get your blood pressure checked. You get this done at many pharmacies or by your practice nurse. If you are being treated for high blood pressure you should have your blood pressure checked every few months.

If your symptoms have improved while you have been waiting, surgery may no longer be the best option for you. Please contact the surgical team at your hospital to discuss if this is the case.

What should I do if my health is deteriorating?

Sometimes a hernia can get stuck outside. The risk is that the piece of bowel in the hernia can get trapped and this may cause a blockage in the bowel or damage the blood supply to the bowel. If your hernia is painful and won't go back inside, then you should call NHS 111. You should be seen by the surgical team the same day to assess if you need an emergency operation.

Rarely the skin over an umbilical hernia can become stretched and can break down. If this happens you should contact your surgical team or call NS 111.

Where can I find additional information?

- **NHS quitting smoking support:** www.nhs.uk/better-health/quit-smoking/
- **Centre for Perioperative Care:** www.cpoc.org.uk/patients
- **NHS drink less support:** www.nhs.uk/better-health/drink-less/
- **NHS lose weight support:** www.nhs.uk/better-health/lose-weight/
- **The Association of Coloproctology of Great Britain and Ireland (ACPGBI) support for patients:** www.acpghi.org.uk/patients/
- **NHS haemorrhoids information:** www.nhs.uk/piles-haemorrhoids/