

Laparoscopic fundoplication

These instructions are intended for printing. The instructions contain sections to be filled in.

Information on the surgical treatment of inflammation of the oesophagus (oesophagitis) and/or hiatal hernia.

Inflammation of the oesophagus (gullet) is typically caused by acidic stomach contents that rise chronically to the oesophagus. It is a so called reflux disease (reflux = flowing back). The sour gastric juices irritate and damage the mucous membrane of the oesophagus resulting in an inflammation, which can cause for example heartburn, chest pain, coughing, and swallowing difficulties. The reflux is caused by an abnormally functioning lower sphincter muscle of the oesophagus that allows gastric contents to flow to the wrong direction. A contributing factor is often a hernia in the diaphragm. Reflux disease is very common. The disease is treated surgically if conservative methods (medication, diet, change in living habits and so on) fail.

Procedure

In the operation, the possible hernia is returned back into the abdominal cavity. The most important part of the procedure is fundoplication, which prevents gastric content from flowing into the oesophagus. The upper part of the stomach is brought from behind the oesophagus to the front and sewn to form a cuff that surrounds the oesophagus. The operation is performed using keyhole surgery, in which camera optics and the required instruments are taken into the abdominal cavity through trocars (hollow tubes) (five small incisions in total). The procedure is performed under general anaesthesia.

Recovery

Thanks to the small wounds the recovery is quick. You can move freely the following day after the procedure, but you need to avoid heavy physical efforts and lifting heavy objects (over 10 kilograms) for two weeks. The abdominal region swells up slightly, so loose-fitting clothing will be more comfortable.



Eating

You should eat only liquid and liquidized food during the first week after the operation. Cold and warm drinks and dishes may cause a cramp in the new cardia. You should avoid fresh bread and meat. You can eat ordinary food in small portions beginning from one week after the procedure, but you must chew the food well. Avoid spicy dishes and carbonated drinks, for example Coca-Cola. Possible swallowing difficulties will be over within a few days. You may not be able to vomit after the procedure.

Wound care

You can remove the folded bandages one day after the operation and also shower.

| A. | Absorbable sutures have been used to close the wound. They do not need to be |
|----|--|
| | removed. The wound tape can be removed after a week. At this point you can also go |
| | to the sauna, but wait one more week (14 days after the operation) before swimming |
| | or bathing. |
| | |

Or

| В. | . Non- absorbable sutures have been used to close the wound. They will be removed | | | | | | |
|----|---|--|--|--|--|--|--|
| | after 7 days at your health centre, occupational health centre, or health clinic | | | | | | |
| | (neuvola) (| | | | | | |
| | go to the sauna the day after the removal. | | | | | | |

Treatment of pain

After the operation, you may experience pain in the area around your ribs and shoulders, in addition to wound pain. The pain is caused by gas that was led into your abdominal cavity for the duration of the operation. The gas irritates the diaphragm, causing a radiating pain in your shoulders. The pain is harmless and disappears within a few days, and it can be eased by taking painkillers and moving.



It is recommended to take painkillers regularly for 1–4 days and after that when necessary:

| Paracetamol | | |
|-------------------|--|--|
| Anti-inflammatory | | |
| Strong painkiller | | |
| Other medication | | |

Sick leave is 2 weeks.

Follow-up visit is after 6 weeks with the operating doctor.

Contact us

If you experience inflammatory symptoms (increasing pain, heavy swelling, warmth, redness, continuous wound discharge) or other problems (such as severe stomach ache, continuous nausea, dizziness, faintness, fever, or profusely bleeding wounds), contact your health centre or the treating unit:

Day Surgery Unit on working days from 07.00–15.00, telephone 06 213 1552
Your own health Centre or occupational health Centre
Telephone nursing services from 15.00–08.00 on Monday–Thursday and from 14.00–08.00 on
Friday and 24 hours a day during weekends and on midweek holidays, telephone 116 117

Vaasa Hospital District • www.vaasankeskussairaala.fi/en • Telephone o6 213 1111

This instruction is intended for our patients who are in care relationship.