



## **Information for patients undergoing Laparoscopic Nissen Fundoplication**

For any other information please contact either:

LGA:	02078814054
Lister Hospital Endoscopy Unit:	02077307733
Princess Grace Hospital Endoscopy Unit:	02074861234

London Gastrointestinal Associates

Tel: 02078814054 Fax: 02078814094 Email: [info@londongiassociates.com](mailto:info@londongiassociates.com)

## About your treatment

You will be having a laparoscopic (keyhole) operation to relieve your symptoms of reflux disease and heartburn. The operation requires 5 small incisions which allow a camera and instruments to be passed into your abdomen. The upper part of the stomach is wrapped around the lower oesophagus (gullet) to prevent the reflux of stomach contents.

### Benefits of anti-reflux surgery

1. In 85% (5 in 6) people the operation successfully prevents reflux of acid.
2. Most patients are able to stop their antacid medication completely.

### Risks and complications

Specific complications of the operation are rare – less than 5% or 1 in 20. They include perforation (tear) of the gullet or stomach, hernia of the stomach or bleeding. Complications such as these may need further surgery.

All surgery and anaesthesia carries general risks. These include chest infection and thrombosis (blood clot). All measures are taken to reduce these risks. Overall the risks of complication is low (5% or 1 in 20) and the risk of serious complication or death is very low indeed (0.5%).

### What to expect

You will be admitted to hospital the day before your operation and can expect to stay for 1 night. If personal circumstances permit, the procedure can be performed as a day-case.

## After your procedure

### Pain control

You will naturally experience some pain and discomfort after the operation. Regular pain killers will be given to ensure this is controlled. It is important that you let the Nursing staff know if you have any pain and discomfort.

### Diet & fluids

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You cannot eat solids for 2 days following your operation to allow for healing and any swelling to settle down. During this time you can intake liquids and very soft foods. You are advised to chew your food well and not to rush meals to help with these symptoms.

### **Wound care**

The small wounds are closed with stitches that dissolve, and will be thoroughly checked.

### **Bowels & urination**

You should not experience any difficulties in having your bowels open or passing water. You may, however, be prone to some constipation whilst you are taking pain killers.

### **Activity**

Anybody undergoing surgery is prone to a number of complications. These include chest infections, formation of blood clots in the calf or lungs. These can occur because you are not as active as you would normally be. For these reasons, you will be encouraged to get up and about as soon as you can manage.

During your stay in hospital you will wear special stockings to assist with blood circulation. You will also be given small injections of a drug that thins the blood to prevent clot formation.

## **Going home**

Once you are independent and managing your diet and fluids, arrangements will be made for you to go home. You must then keep as active as possible, gradually building up what you do each day. It is advisable that you continue to take pain killing tablets regularly to assist with this.

You may continue to experience mild difficulty in swallowing, wind and bloating at home. This will gradually settle, but may take up to 1 month. Diarrhoea can also occasionally be a problem and again should settle.

If you are concerned it is important that you contact your General Practitioner or Surgeon for advice. You should expect to feel back to normal in 4 to 6 weeks and can expect to be back at work in 2 weeks. Do not do any heavy lifting for 4 weeks and do not drive until you can do an emergency stop without hesitation.

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You will be seen in the Outpatients Clinic in 2 weeks after your discharge home. If you have any difficulties before this you should contact your General Practitioner or Surgeon for advice.

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