# **Having Laparoscopic Groin Hernia Repair: TAPP**

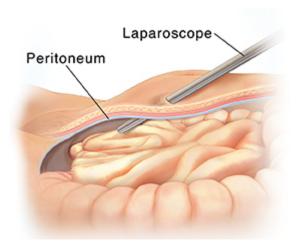
A groin hernia is a bulge at a weak spot in the lower belly (abdominal) wall. Groin hernias are also called inguinal or femoral hernias. Tissue or organs may press into the weak spot. This may cause symptoms of discomfort or pain. If left untreated, a hernia can get worse and may lead to serious problems. Surgery can be done to repair a hernia.

# What is laparoscopy?

Your groin hernia operation will be done with a method called laparoscopy. For this, a thin, lighted tube called a laparoscope is used. The scope allows the surgeon to work through a few small incisions. This is instead of the one larger incision that is made for open surgery. Recovery from laparoscopy is often faster and less painful than from open surgery.

#### What is TAPP?

TAPP is one way to do a groin hernia repair. It stands for transabdominal preperitoneal. The peritoneum is a membrane that covers the organs in the abdomen. During TAPP, the peritoneum is opened to reach the hernia. Your procedure may also be done using a surgical robot. Robotic surgery is one way to do a TAPP surgery. Recovery from robotic surgery is similar to laparoscopic.



# Preparing for your surgery

- Schedule tests as you have been told. These make sure your heart and lungs are healthy for surgery.
- Tell your health care provider about all medicine you take. This includes aspirin, NSAIDs such as ibuprofen, blood-thinning medicines, such as warfarin, herbs, and other supplements. You may need to stop taking some or all of them before surgery.
- Ask your provider for help to quit smoking. This will help stop the hernia from being strained by smoker's cough. It will also promote good blood flow for healing. Smokers are also more likely to have problems with anesthesia.
- Don't lift anything heavy. It can strain your hernia and make it worse.

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- Follow any directions you are given for taking medicines and for not eating or drinking before surgery.
- Follow any directions for showering with a special cleanser before surgery.
- Plan to have an adult family member or friend drive you home from the surgery. Arrange for help with chores and errands while you recover.

### **During the procedure**

The surgery typically takes 1 to 2 hours. You can likely go home the same day. Before the surgery starts, an I.V. (intravenous) line is put into a vein in your arm or hand. This line supplies fluids and medicines.

- To keep you free of pain during the surgery, you'll be given anesthesia. This may be general anesthesia. This medicine puts you in a state like deep sleep through the procedure. Or, you may be given regional anesthesia. This numbs the abdomen and makes you relaxed and drowsy through the surgery.
- The surgeon makes 3 to 4 small incisions in the abdomen. The scope is put through one of the incisions. The scope sends live pictures to a video screen. This lets the surgeon see inside the abdomen. Surgical tools are placed through the other small incisions.
- Your abdomen is inflated with carbon dioxide. This gas provides space for the surgeon to see and work to repair the hernia.
- An incision is made into the peritoneum, and a flap is created. Then the hernia is repaired.
- After the repair, a patch of strong mesh is usually put over the weak spot in your abdominal wall. The patch acts like a patch on a tire. Most mesh stays in place permanently. Once the mesh is in place, the peritoneal flap is brought up to cover the mesh.
- The gas is released from your abdomen. Your incisions are then closed with sutures (stitches).
- Some people are not able to have laparoscopic surgery due to certain factors. In this case, the surgeon will have to use an open procedure. These factors can include obesity, past history of abdominal surgery, bleeding, and the inability to see the organs. The surgeon will make this decision either before or during the procedure.

## Risks and possible complications of groin hernia repair

- · Bleeding.
- Infection.
- Numbness or pain in the groin or leg.
- Urinary retention (inability to urinate).
- Bowel or bladder injury.
- Hernia comes back or new hernia forms.

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- Injury to testicles.
- Problems from mesh.
- Risks of anesthesia.

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