

Post-operative care for patients after perineal hernia repair

This condition involves a failure of muscles in the pelvis which normally resist straining (eg straining during defaecation or urination). A soft tissue bulge is usually visible to one or to both sides of the anus. This condition typically, but not exclusively, affects middle aged and elderly male dogs that haven't been castrated. We strongly advise castration at the same time as hernia repair as castration unquestionably reduces the risk of the repair breaking down in the future, probably by causing the prostate gland to shrink in size. Occasionally the bladder can "flip over" into the hernia causing an inability to urinate. This is a potentially life-threatening complication.

Medication:	Antibiotics:	Antibiotics like claviseptin are usually given for a few days (usually tablets given twice daily).
	Anti-inflammatories:	Non-steroidal anti-inflammatory drugs usually start/resume the morning after surgery. These are tablets (eg carprofen, Onsior or Previcox), or liquid (meloxicam). They should be given with food. If vomiting or diarrhoea is noted, stop this medication and seek prompt advice.
	Analgesics:	We may dispense tramadol, (tablets given twice daily).
	Stool softeners:	We usually dispense Peridale granules or the equivalent. 0.5-1 teaspoonful is given with each meal. Stool softeners are typically continued for 6 weeks.

The wound must not be interfered with or bathed. An Elizabethan collar must be used to prevent interference with the wounds. Any ooze may be gently blotted with kitchen towel, but if ooze is seen, advice should be sought.

Rechecks a few days after surgery may be with your own vet to save un-necessary travelling. We can do this check-up where travelling is not an issue, and all our post-op check-ups are free under our "fixed price" schemes. Please contact us to book an appointment for us to see the case back 2-3 weeks post-operatively when we can remove sutures/staples and check that all is going to plan. Some straining to defaecate in the early post-operative period is expected but this is rarely a problem if stool softeners are used.

Food can be resumed following surgery, and they will probably be hungry because we will have asked for these cases to be starved of food (but not water) for a full 24 hours pre-operatively to empty the rectum as fully as possible. We advise that a highly nutritious, low volume, highly digestible, low residue diet should be fed to minimise the volume of faeces that is produced in the early post-operative period. Your own vet can supply you with a suitable commercial diet. Failing that, a chicken and rice diet would be a fair alternative. This should be fed in two daily meals, with Peridale granules added as above. This feeding regime is recommended for 6 weeks post-operatively while fibrosis develops in the wound and it gains strength. The normal diet can be resumed from 6 weeks post-operatively. Be careful that these patients don't gain weight in the months following hernia repair and castration. Weigh them regularly and reduce their calorie intake if needs be. Seek the advice of your own vet if weight is drifting upwards.

Strict restriction and supervision of activity is required for 6 weeks post-operatively. Dogs should be on a lead anywhere outside of the house including the garden. Allow just 5 minutes of lead restricted exercise, three times a day, until you are advised to the contrary. Running / jumping / climbing (into cars, upstairs, onto furniture, onto kitchen work tops etc) should be prevented. Consider using stair gates and ramps, and ensure that doors and windows are shut to avoid escapes! The reason for this is that activity can increase intra-abdominal pressure – the equivalent of straining. This puts pressure on the wound when it is at its most vulnerable.

Complications

Wound infection occasionally occurs but the sutures we use are ultimately fully absorbable, and this region of the body has an excellent blood supply and excellent healing capability.

Breakdown of the hernia repair and recurrence of the hernia is a recognised complication with figures often quoted of 10% of repairs breaking down within the first year and up to 45% ultimately breaking down. Our experience is that with careful post-operative exercise restriction, feeding management, wound management and simultaneous castration, these figures are overly pessimistic and breakdowns are not common.

Our fixed prices include any follow up consults with us, but don't include further medication or revision surgery.

For further details please see www.wm-referrals.com, "about us", "FAQs".

For further advice please contact us by phone on 07944 105501 or at enquiries@wm-referrals.com. Consider texting/emailing pictures.