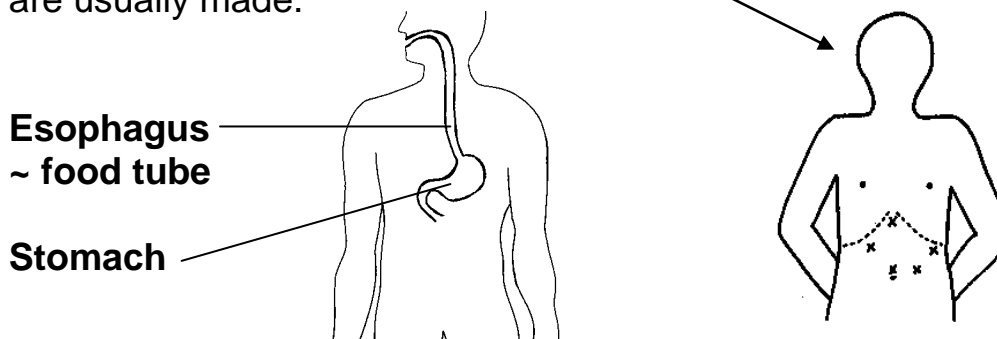


Laparoscopic Fundoplication

What is laparoscopic fundoplication?

A fundoplication is surgery to correct abnormal reflux of acid from the stomach into the esophagus. It tightens the passage between the esophagus and the stomach.

Laparoscopic means the operation is done through 5 to 6 small incisions in your abdomen using a telescope with a small camera at the end. Each incision is 5 to 10 mm long. This picture shows where the incisions are usually made.



During the surgery, the camera telescope and instruments are put into your abdomen through the incisions. The surgeon performs the operation by watching the pictures on a television screen. The surgery takes about 1 hour.

How long will I stay in hospital?

You can talk to your doctor about this. Most people should plan to stay 1 to 2 days.

Before Surgery

A few weeks before surgery, you will come to the Pre-Admission Assessment Unit to learn how to get ready for surgery. Here you will meet with a nurse, pharmacist and anesthetist to learn what you need to do to get ready.

You will have blood tests and an ECG heart test if ordered.

After Surgery

Where will I go after surgery?

You will go to the recovery area called the Post Anesthetic Care Unit (PACU). You will be watched closely and given pain control medication. You will stay here until you are awake and it is safe to go to a bed on a nursing unit.

Will I have pain?

You may have some pain or discomfort. This pain usually decreases over the next few days. Ask your nurse for pain control medication when you need it. The nurse will let you know how often you can have pain control medication.

You may have a pain control pump to give yourself pain control medication. If you have one of these, you will be taught how to use it.

Other ways to relieve pain are:

- walking
- any method of relaxation such as listening to music, deep breathing or imagery

What is an IV?

You will have a thin plastic tube in a vein in your arm. This is called an IV. It is used to give fluids and medication when needed. It is taken out when you are able to drink well.

Will I have nausea?

Some people have nausea after a general anesthetic. If you feel sick to your stomach, tell your nurse. You can have medication to help.

Will I have any tests after surgery?

You may have a test called a Gastrografin Swallow. This is done to check for leaks. If you are having this test it will be explained to you in more detail before you have it.

What activity can I do?

Exercise and activity are important to help you recover. Getting up and moving helps:

- keep muscles strong
- prevent breathing problems
- prevent blood clots
- prevent constipation

Do deep breathing exercises every hour that you are awake.

Ask your nurse to help you, the first time you get up. You will be encouraged to move around as much as you can. Make sure you have good walking, non-slip shoes or non-slip socks on. As you feel stronger, you will be able to take longer walks.

What about my diet?

You start with a pureed diet for 2 weeks and then a moist, minced diet for 2 more weeks. You then progress to your regular diet. Most people are back to their usual diet by 6 to 8 weeks.

You will get written information on the type of food that you can eat and when during your stay here.

How will I take my medications?

- You will take liquid medication for the first few weeks if your medication comes in liquid form.
- If your medication comes in tablet form only, they will be crushed and put in applesauce or pudding to help you swallow them.
- If you are taking a medication that cannot be crushed, the pharmacist will find the correct medication that you can take.

What plans should I make for going home?

You will need to arrange for someone to drive you home.

At Home

Pain control

If you have pain, take the pain control medication as advised. Call your doctor or health care provider if your pain does not go away.

Some medications can cause constipation. You can prevent constipation by eating more fibre and drinking plenty of fluids. If constipation becomes a problem, contact your family doctor or health care provider.

Taking medication

If your medication can be crushed, your nurse or pharmacist will tell you. You should crush your medication until you can swallow well. You can buy a pill crusher at the pharmacy. Crush and take 1 pill at a time. Wait before taking another medication to make sure it goes down. Drink extra fluid to help you swallow. You can also mix the medication with a small amount of applesauce or pudding to help it go down.

Exercise and activity

Gradually resume your normal activities. Moving and walking helps you recover. ✘ Do not lift heavy objects such as grocery bags, a suitcase, or vacuum cleaner until you check with your doctor or health care provider.

✘ Do not do any strenuous exercise until advised.

Return to work

The usual time off work is 2 weeks. When you return to work depends on the type of work you do. Ask your doctor or health care provider when you can go back to work.

Bathing, showering and incision care

You may shower the second day after surgery. Do not use soap on your incisions until the stitches are removed and the area is healed. Pat your incisions dry. If the tape falls off, leave it off. The tape should fall off about 7 days after surgery. If it has not fallen off by then you can gently remove it during your next shower.

When will I see the surgeon again?

Make sure you have a follow-up appointment with your surgeon for about 2 weeks after surgery. At this appointment, your surgeon will explain any further follow-up and testing that you may have.

Contact your family doctor or health care provider if you notice:

- any incision is red, swollen, painful, bleeding or draining
- you have a fever