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William Osler Health System

PATIENT RECOVERY GUIDE

Hiatus Hernia Repair & Anti-Reflux (Fundoplication) Surgery

A guide to your surgery, diet, and recovery at William Osler Health System

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- This booklet is for general educational purposes only and does not constitute medical advice.
- Instructions given to you by Dr. Irshad's team always take precedence over information in this booklet.
- If you are experiencing a medical emergency, call 911 or go to Emergency immediately.
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ABOUT YOUR PROCEDURE

What was done

You have had a **laparoscopic (keyhole) hiatus hernia repair and/or anti-reflux surgery**. Using 3–5 small incisions, Dr. Irshad repaired the opening in your diaphragm and wrapped part of your stomach around the lower esophagus to create a new valve that prevents acid reflux. Most patients go home the same day or after one overnight stay.

BEFORE YOU LEAVE HOSPITAL

- Pain is controlled with oral medication
- You can tolerate liquids or soft foods
- You have passed urine
- You have received your discharge prescription
- Your follow-up appointment has been booked (4–6 weeks)

DIET AFTER SURGERY

Diet progression guide

Week 1–2	• Pureed and soft foods only (yoghurt, scrambled eggs, mashed potatoes, soups). No bread, meat, or hard vegetables.
Week 3–4	• Gradually introduce soft solids. Chew thoroughly. Eat small, frequent meals.
Week 6+	• Return to normal diet at your own pace.
Always	• Sit upright for 30 min after eating. Avoid carbonated drinks for 6 weeks.

RECOVERY TIMELINE

Week-by-week recovery guide

Day 1–3	• Mild shoulder or throat discomfort — normal, caused by the gas used during surgery • Take prescribed pain medication as directed; rest at home • Light walking encouraged; avoid any heavy lifting or bending

Week 1–2	• Soft diet only — see diet guide above • Shower after 48 hours; keep incision sites dry for the first week • Fatigue is normal; rest when needed • No driving while taking narcotic pain medication
Week 3–4	• Most patients return to desk work and light activity • Gradually reintroduce normal foods as tolerated • Some bloating and difficulty belching is normal and settles over weeks
Week 6	• Follow-up appointment with Dr. Irshad • Full return to all activities including exercise • If needed, endoscopy can be arranged to confirm healing

WHAT IS NORMAL AFTER THIS OPERATION

• **Difficulty swallowing** (dysphagia) for 4–8 weeks — the wrap causes temporary swelling. This improves.
• **Bloating and gas** — the new valve makes it harder to burp. Avoid carbonated drinks.
• **Shoulder pain** — caused by residual gas from surgery. Walking helps.
• **Fatigue** — normal for 2–3 weeks. Your body is healing.
• Mild heartburn may persist initially; continue prescribed acid medication.

GO TO EMERGENCY OR CALL 911 IF YOU EXPERIENCE:

• Severe or worsening abdominal/chest pain not relieved by medication
• Persistent vomiting or inability to swallow liquids
• Fever above 38.5°C (101.3°F)
• Redness, swelling, or discharge from incision sites
• Shortness of breath or difficulty breathing
• Signs of blood clot: calf pain, leg swelling, or sudden chest pain

CALL OUR CLINIC AT (905) 458-4520 IF YOU HAVE:

• For non-urgent concerns, call the clinic before going to the Emergency Department.

QUESTIONS? CONTACT OUR CLINIC

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