

Parastomal Hernia Surgery

By,



Kenneth R. Schena, CLU

This article is written from a patient's perspective and is intended to provide information to Colostomates, Ileostomates or Urostomates who have a parastomal hernia and considering surgery to correct their problem.

My name is Kenneth R. Schena and 5 years ago (August 2003) I was diagnosed with colorectal cancer. I underwent Chemo therapy and radiation treatment for a 6 week period to destroy the cancer cells. I was then given 6 weeks off before undergoing surgery that resulted in my having a permanent colostomy. Following surgery, I went through 6 weeks of post operative Chemo therapy as a preventative measure to destroy any latent cancer cells.

Like many patients who have this surgery, I developed a parastomal hernia in the area on my abdomen that was selected to create my stoma. I have since learned that a significant number of people who have this surgery also experience this problem. The area surrounding the stoma bulges out due to the hole cut through the abdominal muscles to create the stoma. There are support belts that can help ease this problem and I used one that definitely helped, but it was not a permanent cure.

Inquires made at my Ostomy Support Group suggested that surgically correcting this problem was not a successful operation, and that, in most cases, the hernia would come back after a short period of time. I went on thinking that I would have to live with this unpleasant problem for the rest of my life. The bulge created problems with the wafer application making it difficult to achieve an airtight seal to my abdomen. I began wearing my shirts out to cover the bulge on my abdomen.

I read everything I could find on the subject to become educated on what was available and how I could benefit to make my life easier. The Phoenix magazine I found to be a most reliable source of facts and the information was presented in clear concise terms that did not require one to have a medical degree to understand them. With the large audience of people and experts to use as a resource, it is easy to find most any answer you are looking for in current or back issues of the magazine. You can even write to medical professionals for specific answers to your problem. Phoenix magazine is a great information resource and everyone with a stoma should have a subscription to keep up with the times.

I was due for my 5 year colonoscopy and during the pre-procedure discussion, I asked Dr. Susan Cera (a colorectal surgeon at Physicians Regional Hospital) who was performing the procedure, about the possibility of surgically correcting my parastomal hernia. Dr. Cera explained that new methods had been developed and new materials were being used to correct this problem. Dr Cera further advised the correction could be done laproscopically with minimal invasion of the body. My colonoscopy went very well and thankfully came back clean.

My parastomal hernia continued to impact my daily life by not allowing me to do things that were part of my normal living. I was unable to lift anything heavier than a plate of food without discomfort in my abdomen. I thought long and hard about my brief conversation with Dr. Cera about the new methods of correcting the problem. I decided it was time to address this issue since it seemed to be getting worse as time passed.

I scheduled an appointment with Dr. Cera to further explore the new procedures and materials for correcting my problem. I prepared a written list of questions (included with this article) and went to my appointment prepared to

get the answers that would satisfy me sufficiently to proceed with the operation or abandon the idea period. We went through my questions methodically and they were all answered to my satisfaction.

I spent the weekend thinking about the pros and cons and scheduled a pre-op appointment the following Tuesday to further review t proceeding with the surgery. I made the decision to go ahead with the surgery.

I was able to schedule surgery for the following Thursday subject to a physical which was done on Wednesday. Once the decision was made I could not wait to get on with it having spent four years dealing with the hernia which seemed to get worse with time. I had resorted to using a support belt which helped, but the thought of eliminating the unpleasant bulge on my abdomen left me with a sense of excitement. I pictured stepping out of the shower without seeing that unsightly bulge and it gave me the anxiety to rush and get it done. Those of you with parastomal hernias must know what I am talking about.

My original colostomy surgery was performed by Dr. Jonathan Efron assisted by Dr. Susan Cera at the Cleveland Clinic Hospital in Naples, Florida. The hospital has since become Physicians Regional Hospital and the best description I can offer is that it is a Ritz Carleton class facility. The rooms are private with state of the art design and facilities. The food is as good as the gourmet restaurants in Naples, well maybe not that good but excellent with many choices. The hospital staff is very professional, friendly and anxious to please.

I arrived at Physicians Regional at 7:00AM the day of my surgery. The preparation took about an hour and I was wheeled to the surgery center at 8:30AM. I woke up in the recovery room at about 12:00PM. Dr. Cera visited with me and advised that the surgery had gone very well and a second hernia at the site of my original incision was also corrected. I now have a bionic abdomen with protective mesh running from side to side. I was back in my room at 12:30PM pleased that the operation was complete. I was served a liquid broth lunch and informed that they were going to get me up soon! The nurse asked if I had any pain. And When I answered affirmatively she went off and came back with two pain pills; take these and I will be back in a ½ hour to get you up! I thought she was kidding.

Back she came at about 3:00PM like a pleasant drill sergeant instructing me to wiggle my way to the edge of the bed. By the time I reached the beds edge, my Johnnie and I were at opposite ends and as I tried to salvage my modesty she said, "You guys all look alike upside down". I successfully slid off the bed onto my feet with her help and did a shuffle walk to the chair and sat down. I spent the rest of the afternoon in the chair and after visiting hours ended at 8:00PM I managed with help to get back into bed. I received pain shots throughout the night and was surprised that I felt quite comfortable considering the operation I had undergone.

The nurse was in early the following morning and removed the tube used to drain my bladder and the sleeves from my legs. Dr. Cera arrived in my room at 8:00AM and discussed the conditions of my surgery and the steps taken to correct them. Dr. Cera asked if I felt well enough to go home to which I answered absolutely. She went off to prepare the paperwork for my release. Shortly thereafter, the nurse came in, got me up and into the chair after which I was served a full breakfast. I later (with my wife's help) walked the perimeter of the hospital floor for exercise. When we returned to the room a nurse removed the balance of hoses and the attachments to my body.

The lunch I had selected from a menu the previous day arrived at noon and it was sufficient to feed my wife and me. I then got dressed with my wife's help and shortly thereafter a nurse transported me via wheel chair to the hospital entrance where my wife was waiting. It seemed unbelievable that I had arrived there only 18 hours earlier and was now leaving with the surgery completed. I can't appropriately express how exited I was to have a flat abdomen. After spending 3 years with the gradually growing bulge, it was very exciting for it to go away overnight and the comfort level it brought to me. It was like going on a diet one day and the weight coming off the following day, wow, wouldn't that be something.

The days following certainly had their share of healing pain and I used the Vicodin pills per the instructions supplemented on some days with Tylenol in between. If I were to do this surgery over again, I would stay in the hospital for at least two or three days to allow the nurses to administer stronger pain medication to control the discomfort. I used a walker for the first week to keep myself supported because standing erect seemed to create abdominal strain. I attended my Ostomy support group meeting (6 days later) the Wednesday following surgery. I

had the pleasure of introducing our speaker for the meeting (Dr. Cera) who was a big hit with the members, many of whom are her patients. She is a brilliant personable young surgeon with a compassionate, caring personality. Dr. Cera has advanced her skills to cutting edge bringing the latest techniques to her surgical practice.

My stoma was not functioning a week after the surgery took place so Dr. Cera had me go in for a CATSCAN to confirm that the delay was caused by the pain medication. The results came back negative and the following day my stoma resumed its normal activity. I would be remiss if I failed to tell you that I use a pouch with a built in cleansing function which was devised by me called Ostomy E-Z Clean. The pouch has a built in manifold and inlet that allows the user to clean the pouch while sitting on the toilet. One never has to come in contact with body waste using this pouch system.

In the week that followed I transitioned from pain medication to Tylenol and when my activity level was too high, I paid for it with abdominal pain. My exercise consisted of going to Wal-Mart, Costco or Target and walking around with a cart. One can walk miles around those places and you always seem to find things to buy that are really not needed. The exercise is good and the places are air conditioned which is critical in Florida where I live, especially during the summer months.

Eight weeks after completion of my surgery my body gets stronger each day, however, when I overdo walking, bending or lifting, I still feel slight discomfort. The incision points where entry was made to complete the surgery have healed and there are no visible scars. I still say "YES" every time I step out of the shower and look in the mirror at my flat abdomen. Attaching my wafer / pouch is so much easier and it does not stick out when I wear golf or tennis shirts. I am very pleased that I chose to proceed with the surgery to correct my parastomal hernia. It is my opinion that colostomy / ileostomy surgical techniques should be improved to eliminate the onset of this type of hernia when creating a stoma.

Having gone through the surgery to correct my parastomal hernia, I would highly recommend it for anyone who is healthy enough to handle the surgery. I would, however, suggest that you find someone with Dr. Cera's skillful talent to be assured of successful results. If doing this over, I would stay in the hospital at least three days to allow professional pain management and get by the days immediately following surgery. Would I do it over; in a heartbeat, I feel so much more normal and it was much easier than I expected. The mesh material used to repair the herniated area is expanded polytetrafluorethylene (e-PTFE) 1mm thick. It is strong, soft, inert and very comfortable with a structure that ensures early fixation to body host tissue with minimal foreign body reaction (guess who told me all this). **Dr. Susan Cera, MD is a member of the Physicians Regional Hospital Surgical staff at 6101 Pine Ridge Road, Naples, FL 34119, Tel: 239 348-4120**



Dr. Susan M. Cera, MD

The Ostomy Support Group of Naples is watching me closely to confirm the long term results. I know there are others in the group working up the courage to move forward and do it. There are many factors to consider when deciding if the results justify going through the surgery. Carefully review your personal circumstances to determine how important and necessary this surgery is and see if it is covered by your insurance carrier and / or Medicare. There are many issues to review related to making this decision, like: are you having trouble sealing the wafer to your abdomen; do you have an embarrassing bulge on your abdomen; are you able to wear the clothes you desire; is there any physical impairment due to the hernia. These and any other personal application questions

should be carefully reviewed. I thought it might be helpful to share my experience with others who may have been discouraged from addressing their parastomal hernia problem. Please understand that my answers are from the prospective of a layperson that has undergone the surgical process. I am very pleased to have made the decision to proceed with surgery and thrilled with the results.

Should you have any questions concerning my experience with this surgery, please feel free to call me at (239) 263-4957 and I will be happy to answer them. My email address is: kensचना@comcast.net

Parastomal Hernia Operation Questions **4/28/2008**

- 1. What are the pros & cons of undergoing the operation?**
- 2. What is the major risk involved with this operation?**
- 3. What is the infection risk on a scale of 1 to 10 (10 being the highest risk)**
- 4. How large is the mesh material that will keep the abdomen from bulging out and is it stitched in place?**
- 5. How do you fit the mesh around the stoma; is it cut to permit fitting around the stoma or is the stoma detached to fit through a hole in the mesh?**
- 6. The operation is done laproscopically with minimal invasion cutting. Is the mesh rolled and inserted then unrolled into place?**
- 7. How many of these operations (parastomal hernia) have you performed conventionally?**
- 8. How many of these (parastomal hernia) operations have you performed laproscopically?**
- 9. What has been your success rate and have you had reoccurrences of the hernia?**
- 10. What is the recovery period for this operation? General length of stay in the hospital? How long before I am able to drive and get back to work?**

Anything else that is important for me to know when considering this operation?

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