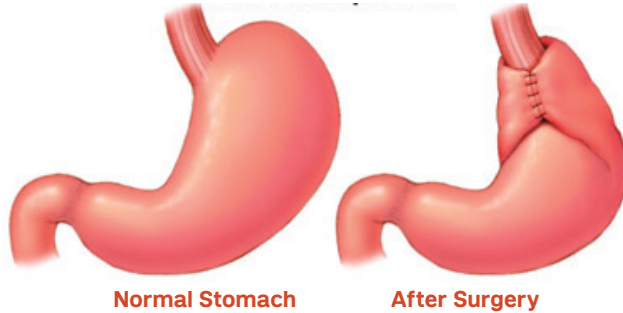


What is Reflux?

This can include discomfort caused by heartburn, chest pain, or food coming back. Some people will have other symptoms including cough, sore throat, or a feeling that something is in the back of their throat. Typically medication works, however, sometimes, the medications stop working or you start having side effects from the medication. In these cases, surgery may be of benefit.

Nissen Fundoplication



Why Surgery?

We believe that quality of life is important and if there are ways we can improve yours then we should attempt to achieve this goal. With reflux the answer is simple. We can perform a surgical procedure to strengthen the valve at the bottom of your esophagus to prevent reflux. Therefore, you as an individual can return to a normal life and enjoy the things you feel are important without further need for medication. This procedure typically takes an hour and a half.

Why Robotic Surgery?

There are many options and techniques to fix reflux. We believe the robotic platform combines accurate visualization and surgical technique with physician comfort and control. This allows for optimum outcomes, with superior repair, and low risk of complications even in the most complicated cases.

The Technique?

The procedure consists of making 5 tiny incisions on your belly. The surgeon operates through these incisions to wrap a small scarf of stomach around the esophagus to recreate your lower esophageal sphincter to reduce reflux.

Preparing for Robotic Nissen Fundoplication

Prior to having the surgery there are tests that may be necessary in order for the surgeon to determine several things about your esophagus and stomach and how they are functioning.

- Esophageal Manometry
- Upper Endoscopy
- pH testing
- X rays

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Weill Cornell Medicine



Robotic Reflux Surgery

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What to expect after surgery:

When you leave the hospital, you will have a prescription for medicine to help with pain. If you were taking any medications for your reflux you typically stop these unless told otherwise. These should no longer be necessary. You will be kept on anti-nausea medications for the next 2 weeks. Please let us know if you are having any symptoms of reflux when you see us in the office.

Your bowel movements may be irregular for several weeks, but they should gradually return to what you experienced before surgery. If you go for more than a couple of days without having a bowel movement, you may try eating prunes or taking a gentle laxative, such as milk of magnesia. This is not uncommon and nothing to be concerned about. Sometimes pain medicine can make you constipated, but as your need for pain medicine decreases, so will the constipation.

You may take showers immediately as you will have a waterproof dressing on the small cuts. You can take the dressing off before your shower on postop day 3. There is skin glue underneath that can get wet at this point. It will usually peel off in 7 to 10 days.

You may return to full activity when you feel up to it. You may perform normal daily activities as you feel up to it. This includes walking up and down stairs, walking outside the house, traveling as a passenger in a car or a plane, etc. There are no exercise restrictions. You may resume swimming and baths 2 weeks after surgery. We want you to walk about a mile the day after surgery. This can be done over the course of the entire day. This will improve your recovery.

Post Nissen Fundoplication Dietary Guidelines

Everyone's recovery is different. Advancing your diet slowly is critical to a good outcome, so listen to your body and do not rush your diet.

Frequently Asked Questions:

1. Do I need to continue to take medications for reflux after surgery?

Typically you can stop taking your medication after surgery for reflux. You may have occasional reflux, and can take a tums if needed.

2. Can I vomit and belch?

Most people can belch and vomit after reflux surgery. Less than 1% of people will not be able to vomit.

3. Do I need to change my diet?

No. You can go back to a regular diet. Typically within 8 weeks you will be able to eat like you used to before surgery. However, you can now restart foods that you previously did not eat because of reflux like coffee, chocolate, and red sauce. Some foods may cause issues, however you may try reintroducing them slowly over the course of the next several months before excluding them from your diet.

4. Will my symptoms come back?

This is unlikely. If you feel your symptoms are coming back please check in with us. The likelihood of this is less than 15% at 10 years. Usually we perform a number of tests prior to confirming a recurrence.

5. What other changes to my bowel habits may I expect?

Most people have no changes. However, if you tend to belch more before surgery you may pass more gas from below after surgery and belch less.

Additional Tips to Recovery

- Eat small frequent meals (6-8 per day)
- You can crush most of your medication for the first 3 weeks after surgery. Please note, extended release tablets should not be crushed.
- Drink majority of liquids between meals, as drinking with meals will make you full. It is ok to take sips with meals to assist in swallowing.
- Sit upright while eating and remain upright for at least 30 minutes after meals.
- Avoid foods that you know cause you to have gas.
- Avoid drinking through a straw and chewing gum to prevent excess gas production.
- It is normal for the food to feel like it is stuck, or going down slowly in the esophagus due to the wrap and swelling and should improve in 6-8 weeks after surgery.
- For the first few weeks eat slowly

Post Nissen Fundoplication Dietary Guidelines

Clear Liquid Diet

Right after surgery for 1-2 days

Water

Decaf Tea

Apple/Grape/Cranberry Juice

Chicken/Beef broth

Jello

Ice pops

AVOID CARBONATED BEVERAGES

Full Liquid Diet

Day 2-7

Milk

Cream of wheat or cream of rice

Strained cream soups

Ice cream

Sherbert

Plain yogurt without fruit/seeds

Instant breakfast:

Carnation, Ensure or Boost

Soft Diet

Day 7 until your 2 week follow-up appointment

Scrambled Eggs

Oatmeal

Baked or mashed potato

Tofu, Fish

Soft rice

Pasta: spaghetti, noodles

Steamed or

pureed vegetables

DO NOT drive if taking pain medications.