

# Surviving Laparoscopic Bilateral Hernia Surgery

By David W. Boles

**[WARNING: This article is extremely graphic in nature and tone. The surgical procedure and recovery period described herein are explained bluntly and vividly. Laparoscopic color photos of my pre-operative and post-operative states are included as images in the body of this article.]**

*May 10, 1999*

For over two years I suffered curious constipation (even though I drank lots of water and got at least 30 grams of fiber a day) and a strange and sometimes painful swelling above and to the right of my pubic bone. I also had infrequent right side pain and infrequent right testicle discomfort.

Sure, I went to doctors and complained and sought assistance, but the side pain was tossed off as indigestion and the testicle pain only brought a painful 10 minute hands on examination consisting of squeezing and turning my testes. Finally, the discomfort above my pubic bone was termed "nothing unusual" even though I told my physician that, every time I had a bowel movement, I could feel what felt like a string being plucked in that area as everything was evacuating.

So, there I sat and stood for two years, exercising and eating right to bring down my weight and cholesterol with infrequent discomfort and constant constipation with no hope or thought of joy of ever solving what was wrong with me. I live and work in New York City and this town is filled with the greatest doctors in the world. The fact that I could not get a definitive answer to what was ailing me was frustrating. I even thought the side pain and testicle discomfort were due to some sort of strange food allergy, but a thorough experimentation with foods brought no reliable result of relief.

## **The Last 10 Pounds**

Then, surprise of all surprises, when I lost my final 10 pounds, I discovered I'd lost a layer of fat around my pubic bone. That loss of superfluous cushion brought new light to the discomfort I was having. Now, instead of a dull pain, I could see the affected area rise and fall when I bore down. It was a strange and scary feeling watching your skin inflate and deflate like a balloon depending on which muscle you're using!

Armed with this new evidence and a new primary care physician, I hopped over for a checkup. I not only had a hernia on my right side above my pelvic bone, but I had a hernia on the left side as well. I would've jumped for joy if I hadn't feared popping the hernia out again. Carrying home groceries always led to swelling in that area the last few weeks and now I knew why. The idea of having surgery to fix the problem was both daunting and a relief.

**Dr. A. Douglas Heymann, M.D., F.A.C.S.**

My primary care physician sent me to Dr. Doug Heymann -- the same surgeon who fixed his abdominal hernia. Whoo-hoo! I was heading to the man who doctors sought out to make them healthy again! When I met Dr. Heymann and told him about my doctor's referral, he said: "You can't get a higher recommendation than that."

In a simple five minute hands on exam Dr. Heymann discovered I had a hernia the size of a lemon on my right side and a hernia the size of a walnut on the left. I told him I never felt a bit of pain or discomfort on the left side and he said that's not unusual. He asked me if I lifted weights when I was younger and I confirmed I had quite often. He asked if I had lifted weights over 200 pounds when I was younger and I told him, "every day, three times a day for six years during junior high and high school." Dr. Heymann nodded and made a note in my chart and instructed me to get dressed and meet him in his office. It seems a lot of young boys get the beginnings of hernia trouble lifting heavy weights and it can take 20 years for the trouble to appear.

**Full Color**

Dr. Heymann explained that the right testicle and right side pain were being caused by the large hernia on the right side and having surgery to repair the hernias would likely resolve the discomfort since the hernia was pressing on a nerve when expanded.

Dr. Heymann opened a giant book filled with color photographs of the same sort of hernias I had and their repair. After the hernia is repaired, a fine, white, plastic mesh is implanted and held tight to the body using titanium tacks (they look like small metal corkscrews) to cover the entire pelvic region on each side to prevent future hernias. Dr. Heymann also thought the hernia surgery would help my constipation problem since part of my intestine might be pushing through my abdominal wall and holding up my feces from being evacuated in the shortest possible path.

Dr. Heymann explained how my tissue would grow into the mesh as it heals and that would give me an all new man-made layer that is highly resistant to future tearing. In fact, the failure rate of the plastic mesh is less than one percent.

**Laparoscopy Defined**

The latest alternative to double hernia repair is to do both repairs during one procedure using the Laparoscopic method. Instead of being down five to six weeks using the classic cut and fix hernia repair, I would be out of action perhaps only two to three days. Dr. Heymann described the Laparoscopic procedure to me:

1. An incision would be made near my belly button.
2. Carbon dioxide would be pumped into that insertion to "blow up" my abdominal wall so there would be room to maneuver the surgical instruments inside me.
3. A television camera would be inserted into that first incision so Dr. Heymann could see what's happening inside me during the repair.
4. Two other smaller incisions would be made near my waistline.
5. Tools would be inserted into those smaller incisions so Dr. Heymann could repair the hernias.
6. The plastic mesh and titanium tacks would be inserted and delivered, as required, into these incisions.
7. Surgery would take approximately an hour and a half.

Instead of five inch scars on each side of my pubic bone with the classic method, I would have three small incisions less than an inch long if I opted for the Laparoscopic method. I agreed with Dr. Heymann that Laparoscopy seemed the best way to fix both of my hernias. Dr. Heymann gave me a pile of interesting reading material on hernias and I was promptly scheduled for surgery 11 days later at Lenox Hill Hospital. The surgery would be in the Ambulatory Wing of the hospital which meant I'd probably be out of surgery by 9 am and walking out the door for home by 11 am.

I asked Dr. Heymann if my HMO covered all the expenses for fixing my bilateral hernias Laparoscopically. He said, "Not really, but I want to sleep at night, so I give all my patients the best care I can." Now THAT'S a doctor! Dr. Heymann obviously isn't in medicine solely to pay off his house and join the country club. He's a surgeon because he believes in using his talent to help people get better.

I asked Dr. Heymann if I could have a local instead of general anesthesia and he said, "No." He explained that blowing up the abdominal wall can be painful and having me under general anesthesia would help ensure I wouldn't feel a thing.

When I told him I'd been awake during a tonsillectomy when I was a wee lad, he was surprised. I explained that while my body was paralyzed, my brain was still "awake" and I could feel the entire operation and I didn't want to risk that happening again since my body is extremely resistant to pain pills and anesthetics.

When I go to the dentist, I have to be shot up twice with Novocain -- once before the drilling and once during the drilling -- because the Novocain wears off quickly. Dr. Heymann assured me the "new" anesthesia procedures over the last 25 years wouldn't pose a problem.

### **Shopping List**

I was given instructions and a shopping list. I had to purchase the following items in preparation for my surgery and subsequent recovery:

- Fleet Enema: Used at 9pm the night before surgery.
- A "Good" Jock: The scrotum can swell after surgery and a good jock will help keep everything tight together to help prevent anything growing beyond its means. I asked my primary care physician the difference between a "good jock" and a regular jock and he said tight underwear serves the same purpose: Keeping everything close to the body. I still have no idea what the difference is between a "good" jock and a regular jock.
- Tylenol: A good addition to the general pain medication Dr. Heymann will prescribe for me on the day of surgery.
- Milk of Magnesia: Pain medication can constipate. Drinking something that can naturally get things moving again is a good bet against future trouble.
- Thermometer: Anything over 101 degrees demands a call to the doctor.
- Reusable Ice packs: Hard to find. I bought six of the small size from Paragon Sports at 18th and Broadway planning to use two at a time (one for each side). Getting six of them meant my lousy freezer would have plenty of time to re-freeze the packs as I traded them on and off my body. 45 minutes on. 15 minutes off.

For 10 days prior to surgery I could take no Advil (ibuprofen) or Aspirin products (Tylenol was okay). Seven days before surgery I had to have a complete physical, full blood tests and a chest X-Ray. 24 hours before surgery I could eat no solid food. I could eat only clear fluids like Jello, Broth, Tea and Apple Juice. Since I'm Vegan that meant I could only have vegetable broth and Apple Juice.

### **Bi-Spectral Index**

Lenox Hill Hospital called me the day before surgery to ask about any medications I was on (none) and any questions or concerns I might have (one). I told the nurse about my anesthesia problem and I heard her type my responses on a keyboard. I asked if Lenox Hill had a Brain Wave monitor called a BIS (Bi-Spectral Index) machine that measures your brain wave activity while under general anesthesia. Anything above a 60 reading means the patient's brain might be awakening during surgery and that calls for more anesthesia.

I told the nurse I'd seen the BIS machine demonstrated on a national news show and that many of the top hospitals were implementing these machines daily in their Operating Theatres since it meant more precise control over the anesthesia used. One patient they interviewed was completely awake five minutes after major knee surgery. The reason for the quick awakening? The BIS machine helped the anesthesiologist use the least amount of general anesthesia to keep the patient under.

The Lenox Hill nurse confirmed they had BIS machines and that one would be waiting for me in the Operating Room the next morning. I leapt for joy and thanked her for alleviating the only concern I had about my surgery!

The nurse wanted to make sure my primary care physician faxed over the results of my physical. I told her that would happen soon and the results of my full blood tests and chest X-Rays would be sent over as well. She asked me why I was having all that done for a double hernia operation since they only needed a simple history and physical. I told her I was following my doctor's orders. She took a moment and I heard her shuffling papers on the other end of the phone and she said. "Ah. Heymann. No wonder." Her tone was calmer, so I took her reply to mean everything was alright.

### **Arriving at Lenox Hill on Tuesday**

I'd been looking forward to surgery for a long time and my wife decided to take a few days off work to stay home with me and keep me company. Sure I was nervous about going under general anesthesia again, but I was also extremely happy the surgery would solve the pain and discomfort I'd been living with for over two years. I was the first surgery of the day and I had to be at Lenox Hill by 6:15 am. The thought of going home by 11 am buoyed any fear bridging the rising sun.

The day didn't start out well when we almost crashed three times on the way to the hospital. The car service driver must've been strung out or hopped up when he picked us up at 5:30 am because he nearly smashed into parked cars twice and came within three feet of slamming us all headlong into a concrete bridge pillar! My wife and I stepped out of the car and stood on shaky legs. We thanked God for the preservation of our lives as we stepped into Lenox Hill Hospital.

We ambled up to the Ambulatory wing and sat alone in the waiting room. We beat the staff to their posts.

**Prep Yourself**

Finally the nurses started arriving and the patients scheduled for surgery were taken inside the wing for preparation. My blood pressure was 146/96. The nurse asked me if I was nervous and I told her I was and that my life had just been spared in a wacky ride to the hospital. The nurse stuck an instrument near my ear and discovered I had a slight temperature increase to 100.4 degrees.

I told the nurse my hands were cold and my head was hot because I hadn't eaten. She asked me when I'd had my last meal and I told her 26 hours ago. She asked me why I hadn't eaten anything for a day. I told her I was instructed not to eat for 24 hours before my surgery. She looked at me in a very odd way, checked her chart and said, "Oh, you have Heymann." She seemed relieved and I said, "He's very particular, isn't he?" She replied, "Yes, he is, but he's an excellent surgeon. I don't think he's ever been sued."

The nurse instructed me that all of Dr. Heymann's patients must wear leggings in order to help prevent blood clots in their legs during surgery. She gave me two long, white, stockings and precise instructions how to put them on. I headed into the changing room to put on my leggings and hospital gown, sock slippers and paper robe.

Another fellow entered with me and told me he was there to have a sinus operation that wouldn't allow him to breathe through his nose for three weeks. He'd have to mouth-breathe instead and he said he couldn't sleep with his mouth open. The guy also told me the last time he'd been in the hospital he had to stay overnight. He was put in a room with three other people and one of them sang Opera in his sleep all night. This fellow was thrilled he was having outpatient sinus surgery so he wouldn't have to spend much time in the hospital. When I told him I was having a double hernia operation, he said, "Gee, I guess mouth-breathing isn't as bad as what you're gonna go through."

**Anesthesiologist**

The nurse told me I'd done an excellent job fitting on my leggings and I was placed on a gurney and wheeled around and back through the guts of Lenox Hill for what felt like a ten minute ride. Finally I was deposited outside the Operating Room and my Anesthesiologist, who spoke with a heavy foreign accent, arrived and introduced himself and asked for my background. I told him of my tonsillectomy nightmare with the anesthesia not working and he told me anesthesiology is an unspecific science. There's a netherworld involved in anesthesiology -- the patient isn't sleeping, the patient isn't awake -- the patient is in a sort of suspended animation state.

I asked him about the Bi-Spectral Index machine and he told me he didn't like them because one then relies on a machine and not instincts. I asked him why he wouldn't use every available means to assist in determining what is happening to patients in the netherworld of anesthesia and he told me the BIS machines don't work, they're just a ploy to get hospitals to buy the machines. I told him I understood his reluctance to be marginalized by technology, but I told him I wanted the BIS machine promised me during my operation due to my history with rough anesthesia experiences.

My anesthesiologist lied to me and said Lenox Hill Hospital didn't have any BIS machines. I asked him why, then, the Lenox Hill Hospital nurse who called me the day before had promised me one if they didn't exist? He quickly recanted but didn't blush or even seem embarrassed at being caught so quickly in a bald-faced lie. He confessed Lenox Hill Hospital did, indeed, have BIS machines but he didn't have one ready and they didn't have enough to go around for every operation: You have to ask for them specifically. I told him I did specifically request one and that one was promised to me. He promptly departed without further comment.

After the anesthesiologist left, I was struck with the sinking feeling that today wasn't my day. First the near car crashes and now my anesthesiologist had lied to me.

A nurse came out of the Operating Room and asked me a few questions. When I answered and told her I hadn't eaten anything for over 24 hours, she gasped and asked me why? I reminded her I was instructed not to eat anything. She checked my chart and nodded, "Oh, Heymann. Right." She had me sign another release stating that if the surgery couldn't be done Laparoscopically, it would be done the classic way. With my luck that day so far, I envisioned being down six weeks instead of three days. I begrudgingly signed the form and wondered why they didn't have me sign the form earlier in the morning when I had on my glasses so I could actually read and understand what I was signing. To have such an important release thrust upon me moments before my surgery was just plain sneaky. I put on the hair net the nurse gave me and did some self-hypnosis to calm myself down.

When the nurse left I was left alone and considered wandering the halls to look for a BIS machine I could borrow for my operation since the one promised to me the day before had obviously been axed by my anesthesiologist.

Before I could get off the gurney, Dr. Heymann arrived and read my chart. He was late and the nurses and anesthesiologist had been searching for him for the past twenty minutes. Dr. Heymann seemed edgy and not as warm as he was in his office. I decided that must be his game day demeanor and I silently vowed not to interfere with his coolness since my day was already rocky and it had barely started. I told Dr. Heymann I had to urinate and he said not to worry because I'd have a tube up my penis during the operation to drain anything left in my bladder. I shrank an inch or two and decided to just shut up and go with the flow and allow myself to be acted upon. I promised myself I would ask no more questions or make any more requests the rest of the day.

### **The Operating Suite**

As I was wheeled into the Operating Room a loud and vicious argument was occurring in an off-room. One of the nurses asked someone to close the door and I reminded myself to stay calm as the shouting diminished beyond earshot. Someone on the surgery staff made a comment under his breath about Lenox Hill Hospital being *General Hospital*.

Then a second shouting match erupted in the Operating Room. A man who sounded like Dr. Heymann was yelling at an assistant about not doing something or "he'll get sued." My anesthesiologist poked something into my arm. I whispered to one of the nurses, "Is that Dr. Heymann yelling? I don't have my glasses on so I can't tell." She replied softly, "Yes, but don't worry about it."

I closed my eyes and tried to remain calm as events and sounds swirled around me. Next, I was strapped down to the table with giant Velcro belts as Dr. Heymann approached me. He told me he'd had a discussion with my anesthesiologist before I was brought into the Operating Room about my concerns going under general anesthesia. They had both decided to let me try an IV drip, a local anesthetic and an epidural (a needle in my spine to numb me from mid-chest down) if I were interested in going that route instead of general anesthesia.

Dr. Heymann warned me the epidural had a 30-50% chance of working and that if I had any pain at all, he would put me under general anesthesia immediately. I asked him why he changed his mind? In his office he was dead set against giving me a local with an epidural and Dr. Heymann told me my anesthesiologist convinced him to give this a try. I told him I'd like to try the epidural approach first. I was then ordered to turn on my side to receive the needle in my

spine, but I couldn't move because I was strapped down! The folks in the Operating Room laughed at that turn of events and I was happy to see the tension of the early morning breaking down.

As I curled my knees to my chest, my anesthesiologist got into an argument over what he needed. He asked his assistant for a certain size of something and the assistant asked back, "Which size?"

My anesthesiologist said, "There's only one size. Pick one and give it to me."

The assistant then said, rather crudely, to "Speak English" and he was being mean, not funny, since my anesthesiologist had a heavy accent. I wanted to leap off the table and punch that bigoted ass right in the kisser! I, however, resigned myself to the fact that this sort of tension and animus had to be normal at Lenox Hill Hospital since no one else was standing up for me as the patient and begging friendliness and comity from everyone before they open me up. As the argument dissipated, I felt a burning sensation down my left leg but nothing down my right. I described all this to my anesthesiologist and he said nothing.

I was returned to my back and Dr. Heymann told me I shouldn't have shaved around my pubic bone because they don't need to shave down there when the surgery is done Laparoscopically. I told him that was done three weeks ago with a beard trimmer so I could show my primary care physician precisely where my hernias were. Dr. Heymann nodded and said he was concerned I might've used a razor blade to shave and that's a risk he needed to address in case I had any lingering nicks or cuts.

A white blanket was placed near my head to block my view of them working on me down below. I immediately felt someone jamming something hard into my penis!

"Ouch!" I cried.

"You felt that?" Someone asked incredulously.

"Yes." I bit my tongue and said to myself (in the angry spirit of the room encompassing me), "A red hot poker up my rump would be less painful!"

An automatic blood pressure cuff inflated and deflated routinely on my right arm.

I felt my entire stomach being lifted and torn. Lifted and torn. Lifted and torn. I guessed someone was taking giant slabs of tape, attaching them to my abdomen, and ripping off the tape to remove the hair without nicking or cutting me.

"I can feel you ripping the hair off my stomach."

"You can?"

Before I could answer, my chest was being swabbed down with something cold. I started shivering. It felt like rubbing alcohol because it cooled as it dried, but my entire body was shaking and I could not speak.

Someone asked me if I'd had children yet.

My anesthesiologist told me he was going to give me some more medicine.

I struggled to answer the question about children. I knew from the literature Dr. Heymann had given me previously that scarring can occur with hernia operations and that can, in some cases, lead to impotency. I struggled to shout out my answer, "No! No children yet! But I want them!"

But I could not move or speak.

Everything became fuzzy.

I was surrounded by darkness.

And then?

Nothing...

### **Lenox Hill Recovery**

I was next aware of a harsh light shining directly in my eyes.

I could feel people touching me, but I could not move.

I heard voices but could not respond.

I heard the voice of my anesthesiologist urging me to wake up.

I heard nurses telling me to put my arms down.

Someone was taking my blood pressure over and over again.

I felt something clamped on my right big toe.

People were calling my name and asking me to respond.

I couldn't move.

I was flat on my back.

The light was bright and bothered me.

I watched nurses pass back and forth before me but I couldn't move my head or eyes to follow them.

I tried to clear my head.

I wasn't in the Operating Room any longer.

I guessed I was in recovery.

I couldn't think straight or even in curves.

Thoughts were interrupted and jagged.

I had trouble putting together words into thoughts in my head.

I decided to concentrate on communicating.

Sounds and voices would dim and grow in volume and I strained to pick a sentence out of the din and try to communicate from my side.

Finally, I understood one of the nurses was urging me to squeeze her hand.

I tried.

I heard her ask me again to squeeze her hand.

I did.

Harder this time.

She said something to someone that she felt me squeeze her hand.

Quickly, a lot of people passed by me as they appeared to be leaving my side.

Again, the voice made a request: "Move your foot."

I tried to move my foot.

"Good."

I felt my blood pressure being taken again. I hate having my blood pressure taken and if there's anything that gets my blood pressure up and gets me livid and ticked off is having my arm squeezed of its blood! You want me awake?!! KEEP TAKING MY BLOOD PRESSURE and I'll be up and running mad in the street in ten minutes!

I was left alone awhile as I slowly came out of my anesthesia stupor.

I saw an IV dripping into my left arm.

I saw the time was 11:30 am. I was shocked! The original plan was that I would be out of the Operating Room by 9 am. Something must've happened. As I wondered what might've gone wrong, my unstable thought process was interrupted by a very real and recognizable...

AGONY!

Ooof! Did I have pain in my abdomen! My beautiful stomach, treated to 600 daily sit ups, was now bloated and throbbing. I struggled to speak my first words...

"Pain."

I mumbled, I think. A nurse asked me where I had pain and I pointed to my right side. I was asked if the pain was a lot and I tried to answer back in the affirmative. The nurse made a call, told someone I was in pain and got the go ahead to shoot me up with something beginning with a "t" and shoot me up she did! BANG! Right into the meat of my upper right thigh! Ouch! That shot hurt a lot going in, I only wished what she'd given me had worked.

As I tried to force myself to "come to" I asked what that was on my big toe under my sock. The nurse told me that was a device to monitor my breathing: To help make sure I was getting enough oxygen in my extremities.

Someone else asked me if I wanted the light out of my eyes and I was able to nod.

Ahhh!

With the light out of my eyes I could think again.

I was told I had to stay where I was for a couple of hours because the epidural numbed my legs and I would not be able to walk. I didn't have the ability to express myself and tell the nurse the epidural didn't work and that I likely could walk sooner than a couple of hours. I silently wondered at the anesthesia. One moment I was struggling to answer a question about having children, and the next moment -- albeit four hours later -- I had been operated on and was in recovery. Losing four hours in what felt like the blink of an eye was an amazing query to ponder.

Someone took my blood pressure again and again every 15 minutes. I was beginning to wake up fast!

The stabbing pain in my right side was becoming unbearable. I told the nurse I was in big pain and that the first shot hadn't worked. The nurse made another mysterious call and got the okay to give me a morphine IV drip. Unfortunately, the morphine didn't quash the pain either, it only numbed my left ear.

### **Are You, Or Have You Ever Been...?**

A nurse asked me if I did drugs? I told her no. She said not to be insulted because they needed to know if I had something else in my body that might be affecting the morphine. I told her I didn't take any medication and that I didn't even put caffeine into my body. I asked her even if I were a drug addict, did she think a drug addict would confess to being addicted? She didn't respond. I reminded her she could've spared me the insult by checking my chart since Dr. Heymann had ordered a full pre-op blood screening before surgery. "Oh, right, Heymann," she said, "I could've done that."

As I continued to complain of pain and discomfort, I asked why I had been in surgery so long. No answer came, but I was told I had been catatonic for 30 minutes after surgery. My eyes were open, but I would not respond. Yes, I thought to myself, I could not respond, but I was awake and aware... and worried.

It was time to check my wounds. My hospital gown was lifted up and I saw my GIANT, BLOATED STOMACH looking back at me with three waterproof bandages. There was blood on the gauze underneath the stretchable clear tape, but the nurse told me that was normal. I also noticed I was wearing a jock! How odd, I thought. Someone must've put that on me after the operation. What a heavy task that must've been: Maneuvering 150 pounds of dead weight into a jock can't be easy or fun. The nurse asked me if I had any pain or swelling in my scrotum and

I told her everything down there felt fine as far as I knew and I repeated my right side was killing me.

### **Baby Steps**

The nurse told me that when I felt my legs coming back, they needed to move me to a chair across the room so I could have some juice and crackers and, perhaps, a muffin. The nurses would help me move when I was ready. I told her I was ready to move now. She reminded me of my epidural and its effect on numbing my legs and I informed her the epidural didn't take and that's why they had to put me under general anesthesia. We decided to move me over to the chair.

The nurse said my abdomen would be very sore for a few days and that if I wanted to kill my wife at home, I would make her pull me from bed without helping her. If, on the other hand, I wanted to participate in my rehabilitation, I would learn to push myself up and out of bed and chairs using my arms. That would get the initial movement started and then my wife (and the nurses) could help steady me as I began to get up and walk. I agreed that the best effort would be to have me be as helpful as possible and my nurse smiled.

She said another tip for getting out of bed on my own is to roll over on my side to the edge of the bed and then use the edge of the bed to help steady me as I push up with my arms. If that didn't work, she said, I could employ a method her heart surgery patients use and that is to tie a rope to the end of my bed with a loop on the other end. When I want to get out of bed, I would pull myself up via the loop end. I realized that having no stomach muscle control and being so heavily bloated is probably some of what pregnant women experience in dealing with a lack of mobility.

As I pushed myself off the gurney with my arms, two nurses each took an arm and we walked (stumbled, really) over to a big chair in the recovery lobby. I was offered two Sara Lee muffins: Cornbread and Blueberry. I couldn't eat either one since they both had eggs, whey and milk as ingredients and Vegans don't eat animals or animal byproducts in any form. I was able to eat saltines and cranberry juice but I kept wishing for some fresh fruit or something else of substance like a slice of sourdough bread or a vegetable of some sort I could've eaten to regain my energy faster.

### **Heymann Says Hey**

Dr. Heymann came into the recovery area after his next surgery was finished. He looked great and he was back to his old, relaxed, self. He was thin and fit in his hospital greens and if I'd been clearer of mind, I would've told him he should wear a tailored white doctor's coat in his office because the one he currently wears makes him look chunky. Who knew the guy was in such great shape? I asked Dr. Heymann if he'd done my left side and he gave me a look and said, "Yes." I told him that amazed me because I had zero pain on my left side anywhere! He told me that was not abnormal. He went on to tell me the operation "went very well" and that amazed me as well because I didn't feel very well but Dr. Heymann was smiling and reassured.

I asked Dr. Heymann about being asked about having children in the Operating Room before I went under. He said he would never ask a patient a serious question like that as they were being placed under anesthesia. I asked him who asked me that question, then, and he had no idea. I told him I did want to have children and he didn't predict I'd have any problems because of the hernia repair since the surgery had gone so well. Dr. Heymann told me the repair had made me "like steel" down in my pelvic area and that made both of us smile. Dr. Heymann also suggested I use Aleve as a pain killer at home if I needed it.

My wife is Deaf and she relies on written communication to wholly understand both sides of a conversation. Dr. Heymann was the only one of 15 people my wife had to communicate with at Lenox Hill Hospital during my stay who actually WROTE to her to provide vital information. Everyone else expected her to read lips and that amounts to nothing more than a guessing game.

### **Going Home The Hard Way**

The nurses told me I could go home as soon as I could urinate on my own. After several dry attempts I was finally able to urinate and the nurses released me unto the world. My release form stated I should wear a jock for 48 hours (Dr. Heymann's recommendation was for three to five days). They also tried to get me to drink a ginger ale, but Dr. Heymann's handwritten instructions to my wife said "no soda."

The hospital instructions also told me not to change my bandages until I was seen by my doctor, yet Dr. Heymann's office gave me pre-operative instructions informing me I could remove my bandages myself on the third day of recovery. Confused, I decided to follow Dr. Heymann's instructions over those of Lenox Hill Hospital.

### **Packing Up**

The nurses offered to let me use a wheelchair to get down to the curb so I could catch a cab home with my wife. I told them I would leave Lenox Hill Hospital the way I entered it: "Walking on my own two feet." I went to the changing room and, with the help of my wife, got rid of my hospital gown and paper robe.

I noticed the jock they put on me was a LARGE. I bought a SMALL size jock before the operation and that fit me perfectly. A LARGE! How insulting, I thought, that the doctors thought I was a whale who couldn't wear a small size.

I didn't know if I should leave on my leggings or take them off. No one told me to take them off, so I left them on. As I pulled on my sweatpants, I was in even more pain! Ugh! They barely fit! The elastic that had been so comfortable in the morning now was cutting hard into my abdomen! Ooof! I was lucky that I had worn some Birkenstock clogs to the hospital, so tying and untying my shoes was a null issue.

As my wife and I ambled down the hallway, I started to feel dizzy. We stopped. I gathered my breath and we continued on to the elevator. In the elevator I felt nauseous. My wife asked me if I was okay and I nodded I was. We walked outside and into the fresh air and I felt sick.

### **Dead Away...**

My eyesight was fading in and out as I stood by the curb alone while my wife was in the middle of the street flagging down a cab. I was blacking out. I wanted to throw up. I was losing my will to stand. My wife must've seen me wavering because she came running to hold me up. I looked to my right and saw a woman ask something about us needing help...

I felt like this was it: I was dying.

My knees buckled.

I felt someone grab me from behind.

I passed out.

### **Return to The Land Waaay Down Under**

As my eyesight returned, I discovered I was in a wheelchair with my feet dragging on the floor. I was tipped back so my feet wouldn't drag and I was wheeled onto a service elevator. I saw my wife. She was talking to me but I could not speak. I could hear and see a bit, but I could not respond: I had returned to Catatonia, The Land Down Under!

My wife later told me I didn't actually hit the ground when I passed out. I just kind of crumpled into her and she held me upright until two guys came to help. Someone then ran into the hospital and got a guard to bring a wheelchair for me.

The guard asked if I had been a patient and when my wife said, "yes" he helped us. I guess if the answer had been "no" he would've left me there on the street.

I made a mental note to ask Dr. Heymann to require from now on that all of his patients be required to leave Lenox Hill Hospital in a wheelchair. That mandate will nullify the macho-man arrogance of "I can walk outta here just as I walked in" that overtakes many of us men who want to prove to ourselves and the world that surgery didn't adversely affect us.

As I was deposited back in the recovery room by the guard, the nurses struggled to lift me out of my wheelchair and into a funky chair that tipped back so your feet were higher than your head. They kept speaking to me and it took a good thirty minutes before I was able to respond. They angled me back down into a sitting position, gave me more cranberry juice and crackers and poked an IV drip into my right arm.

Dr. Heymann had finished yet another surgery and came over to see me. He asked what happened and I told him. I also told him I was having a lot of pain in my abdomen. He told me I could take a Tylenol now and that I could double up on my pain medication and take my first pills right now. He prescribed Hydrocodon-APAP 5/500M for me to take to ease my pain.

As Heymann left, I saw another patient on a gurney in the recovery room. He was wearing the same white leggings I was wearing. "Ah, Heymann," I said to myself and smiled knowing where he had been and what he would go through. That gentleman would also complain of pain for the next three hours and get several medical cocktails as I had, until finally, the nurses gave him Percodan. In ten minutes the guy was smiling and said softly, "The Percodan worked." What a lucky man he was to finally be pain free.

### **Confronting the Anesthesiologist**

My anesthesiologist came over and asked me about passing out. I told him what happened and he had no idea as to the why of it. I also was clear minded enough to inform him that it was extremely disconcerting to have his assistant arguing with him over the size of what he was requesting and then imploring him to "Speak English" in front of me in a nasty and disrespectful tone.

My anesthesiologist told me he didn't mind being spoken to that way and that the guy was a friend of his and that it was nothing to be concerned about.

I explained that, as a patient undergoing surgery, it was not a pleasant experience to witness because it undermined confidence in the anesthesiology team and that if he labels people who speak to him in that manner friends, I'd hate to meet his enemies.

My anesthesiologist departed without further comment.

A nurse with glimmering eyes came over and quietly asked me what I had been discussing with my anesthesiologist. I told her everything in detail. She kindly responded and said, "We need to do a better job thinking of the patient undergoing surgery. I wouldn't have wanted to hear that argument, either."

### **Boles Means Delay**

I overheard a nurse explaining to someone on the phone the reason that the woman's husband's surgery had taken so long was because "the first patient of the day took three hours in surgery instead of an hour and a half." Hmm... that could only be me and having the nurse look at me when she said "the first patient of the day" confirmed that my surgery had not gone according to plan. I would ask Dr. Heymann about that when I saw him in a week for a check up.

The pain in my abdomen was killing me. I lifted up my shirt and saw my sweatpants knifing into my stomach. Oh, the pain! My waterproof bandages had actually, get this, bonded into the elastic waist of my sweatpants on a molecular level and become one. I knew this wasn't right. I had to do something to relieve the pressure.

I asked a nurse for scissors and I cut the waistband of my sweatpants in three places and felt an immediate rush of relief!

Finally!

It took me ten minutes to successfully peel the waterproof bandage away from my waistband. As I sat there panting to catch my breath, I realized one horrible thing: Blowing up my stomach with carbon dioxide for the Laparoscopic surgery had increased my waist size by a factor of two! Instead of wearing a small size sweatpants, I was now a large!

So that was why I had been put in a large jock instead of a small jock! I wish I'd been warned about that size change beforehand because I would've purchased a larger jock and bigger sweatpants for my recovery period.

I also bet myself the leggings I was still wearing along with the tight sweatpants probably did something weird together and squeezed all the blood out of my head or something and made me pass out.

The nurses didn't want to let me go home. They thought I was paler than normal and my blood pressure was something like 100/60.

### **Anesthesia Calling**

At 5:30 pm a tall, attractive, woman with brown hair, glasses, and a heavy accent greeted me. She introduced herself as the head of anesthesiology at Lenox Hill Hospital. She wore hospital greens, two cellular phones and a pager on her waist. Neon green plastic clogs decorated her feet. As she went over my chart, she asked me to stay the night. My eyes were pinned to her two cellular phones. I wondered why she had to carry two and how they were used together.

As she pulled my focus back to her, she offered to pump me full of morphine to get rid of my pain, but the catch was that I would have to stay overnight so they could keep an eye on me. A gentleman with graying hair and glasses joined her. He was also dressed in hospital greens. He looked at my medical chart and shook his head.

I told her I had been complaining of pain since 11:30 that morning and that it hadn't been reduced one whit. I said I'd taken two pain pills Dr. Heymann prescribed an hour ago and they hadn't lessened my pain at all, either.

She told me they had given me pain medication all day. I agreed but pointed out that none of it had worked and I asked her why she thought giving me more morphine would make a difference? When she didn't answer, I thanked her for her offer and said that I was going home. I also remembered earlier that morning what that fellow having the sinus operation had said about being stuck in a hospital room overnight with three other guys, one of which sang Opera all night. No thanks. I'd rather pass out at home than stay up all night in the hospital.

This time I accepted a ride down to the curb in a wheelchair. My wife flagged down a cab and a nurse helped squeeze me into the tiny back seat. The wild ride home with harsh stops and quick accelerations made my stomach jump, but I didn't get nauseous or pass out again.

### **Home Sweet Home**

When we arrived home, my wife immediately helped me peel off my clothes. First the mangled sweatpants. Then the "Heymann leggings" were peeled away. My shirt came off. My large jock fit perfectly and I looked like a fat cow! I had no control over my stomach muscles: They were distended and achy. I melted into bed. It was 7 pm. We'd been gone for 13 hours when we expected to return in five. Thank goodness my wife had taken the rest of the week off from work. She was a wonderful nurse.

It was time to take my pain medication again. Every four hours I took two Hydrocodon-APAP 5/500M and the pills did NOTHING but blur my vision. They abated no pain. They brought me no comfort. My wife implored me to take them anyway. "Dr. Heymann wouldn't have given them to you if he didn't think they'd help." So every four hours I took them two at a time until there were no more.

My spine was killing me as well. The insertion point for the epidural needle was extremely sore and I regretted more than ever risking the 30% off-chance that it would take successfully. "Better to suffer in Catatonia," I thought, "than suffer in the full light of a wounded spine."

My wife had purchased bunches of magazines for me to read as I recuperated but I couldn't read the print in any of them since my vision was blurry from the medication. Luckily the television was in perfect focus, so I surfed and surfed and surfed as I exchanged cold packs every 45 minutes with 15 minute breathers in-between. I got out of bed to urinate several times. Each time I got up I made it to the edge of the bed myself, pushed myself up as the nurses taught me and my wife walked with me to the bathroom. It felt good to urinate. The smell of the hospital diminished from my body with each subsequent dark urination.

I was starving. I was thirsty. I ate some great vegetables and bread and drank glasses of water. That felt good. I didn't have a fever.

As the night folded around me, I fell asleep quickly. I awakened every four hours to take Aleve and my pain medication. I couldn't sleep on my side because it was too painful. I couldn't sleep on my stomach for the same reason. My stomach was huge and it was throbbing and it was sore.

### **Post-Op Wednesday**

My abdomen was still sore. I didn't have any burning sensations anywhere. My scrotum was fine. I felt drugged up. Everything around my pelvic region felt mushy. My eyesight was still too blurry to read. I slept and watched television. I had a hard time talking. I couldn't produce enough breath from my diaphragm to make a loud enough voice to be heard.

I couldn't lift my right leg without pain shooting throughout my leg muscle where it attached to my pelvis. While I could have taken a shower, I didn't have it in me to try. My bandages looked unchanged from the day of surgery and I deemed that good since there was no new bleeding. I ate some food, drank some water and swallowed a tablespoon of Milk of Magnesia to fight against the constipating pain medication that wasn't working for me anyway. I was supposed to call Dr. Heymann's office to check in but I couldn't. It hurt too much to move my leg to walk to the phone.

### **Post-Op Thursday**

My abdomen seemed to be even bigger than I remembered and my large jock felt as if it should be an extra-large. I took my first shower. Lifting my right leg high enough to enter the tub was a chore that took my wife and me five minutes to accomplish. As the warm water hit me, my wife stood outside the shower and lathered up the vital areas. I rinsed and left. Total shower time: Less than two minutes. I couldn't stand to stay in the shower any longer. I felt nauseous and dizzy if I stood for too long.

My first evacuation happened easily and nothing popped out of my pelvic region like it always had before the surgery. I was very happy about that and even through the pain and swelling I could feel I was very firm "down there."

My medication ran out. I was happy about that because it didn't help me anyway. I removed my bandages. The steri-strips over my wounds looked good and strong.

In the afternoon I noticed a bit of swelling where my main hernia was on the right side. I checked my answering machine and had several messages from Lenox Hill and Dr. Heymann's office. I decided to skip calling back Lenox Hill since that place was fast becoming a bad memory. I called Dr. Heymann's office and asked them to let Lenox Hill know I was fine. They agreed to do that for me but first Dr. Heymann's office took me to task for not calling them the day before to report my condition. I told them I didn't feel well and couldn't really speak. I told them about the swelling and was re-assured that was absolutely normal and to keep ice on my hernias where the repairs were done, not where the incisions were. Dr. Heymann's office also reminded me that I had major surgery and I should understand that just because I didn't have large scars and bruising on the outside didn't mean there wasn't a lot of healing happening inside.

My wife's patience was wearing thin on day three of playing nurse. She had no idea it would be so much work getting me things and helping me in and out of bed all day. She thought I would be sleeping for a week so she could get caught up on her own personal business while she was off work. No such luck! When you have Laparoscopic hernia surgery, the idea is to get up and get back to a normal life as soon as you possibly can but you need a lot of help to do that safely.

### **Post-Op Friday**

I was only on Aleve now and it wasn't calming my pain, either. I was sick in bed all day. Didn't eat much. I could not speak without pain in my abdomen. The area where my hernias were fixed felt as if everything was shifting around. I stayed in bed and employed my new best friends all day: The ice packs. If I ever had any passing doubt about my wife loving me, that doubt is dead. She took care of my every whim.

### **Post-Op Saturday**

I was pleased to have a partial involuntary erection when I awoke. That was the first sign of autonomous penile activity I'd had since the surgery and it was good to see my old friend getting a mind of his own again.

I was still dizzy and nauseous. I decided to stop taking Aleve. I switched to Extra-Strength Tylenol. That did the trick! Tylenol lessened my pain and my nausea and dizziness stopped when I stopped taking the Aleve. I still had difficulty lifting my right leg.

When my wife left to get lunch, I snuck into the bathroom and took a shower. I reasoned that if I slipped and fell, I'd only be alone for 20 minutes before she got back: That was a risk I was willing to take to test my independence. I lathered up the vital areas, rinsed, and got back into bed. Mission accomplished.

I evacuated again and never had it so good. My pelvic area felt as if I had a board across it and that board was tilted INTO my gut and, frankly, it was a strong and firm and indestructible feeling of great power! I didn't even have to push to evacuate: I simply relaxed my sphincter and everything trippingly fell into the bowl without any effort from me at all.

My eyesight returned to normal and I was able to read all the magazines my wife bought for me five days ago.

### **Post-Op Sunday**

I awoke with a full morning erection like I used to have before the surgery and felt very proud to be back in such a large, involuntary, way. My right leg pain continued. The Tylenol was magnificent because it quieted the pain in my abdomen without making me dizzy and nauseous.

I decided to stop wearing the jock. I'd had it on since Tuesday and it was becoming uncomfortable to wear for so long in basically the same position. My old underwear didn't fit because my abdomen was still bloated. I decided to go naked all day.

I took a two hour walk around our small, one bedroom, apartment, which meant walking from the bedroom to the living room for two hours without stopping to sit down. That long walk felt very good. My spine still hurt from the epidural and standing up was the best remedy for that problem.

I also wanted to test my nausea and dizziness by standing erect for two hours and I passed. I cut back on the ice packs and used them infrequently when I sat and read or took a nap. I never had any bruising or discoloration or burning pain. Maybe I didn't give those problems a chance to start by my religious use of the ice packs.

### **Post-Op Monday**

When my wife went back to work I decided to "try out the pipes" to see if I had any swelling or scarring that might interfere with my ability to reproduce. The only way to test this was using a hands on manner... or a hand on manner... if you catch my wave. The result was ultimately successful though the specimen that presented itself was thin and without much of the usual volume and substance... but at least something came out and it felt good in the process so I promised myself to move on and not obsess over the meaning of the liquid thinness.

I did 25 of my usual 600 daily sit ups and felt good. I tried 10 of my usual 100 daily push ups and that felt good too. I didn't have much stamina, though, and that little exercise routine took a lot out of me. When my wife got home we went for a 30 minute walk outside. That was fun and the more I walked the more my right leg felt better.

I discovered I had a problem with numbers. I looked at a string of numbers and understood them mentally, but when I would try to speak those numbers aloud, they would be pronounced in reverse order. I tried it with an invoice number, a credit card number and several phone numbers. I could type the numbers right, I could write them fine, I could dial a phone without trouble, but ask me to speak the numbers aloud and they would come out backwards. I thought I was losing my mind. The awful, strange, netherworld of Catatonia was biting back at me again.

### **Post-Op Second Tuesday**

I was shocked to see I'd gained three pounds in the week since my surgery. That was more depressing than the pain I felt in my abdomen. I did 50 sit ups and 25 push ups to stem the tide of fat rebounding in my body. I was shocked at my loss of stamina. I could barely breathe when I finished my simple exercises. I rolled over on my exercise mat to my stomach. My abdomen didn't feel like its old self. It was still bloated. I was forgetting words. I began a sentence and would not be able to finish without struggling to place one word after the other. I could add volume to my speech, however, and that helped sooth the frustration of forgetting what I was about to say.

### **Post-Op Second Wednesday: One Week Check Up**

I went to see Dr. Heymann for my one week check up. I thought he'd put me right back in the hospital because he said I'd be up and about and back to normal in two or three days. Well, it was the eighth day after my surgery and I felt lousy and weak and fat and bloated. Imagine my surprise when Dr. Heymann told me how great I was doing. Dr. Heymann reminded me I was recovering from major surgery. He wanted me to remember a lot of healing beneath my skin was still to come.

He examined me and declared me in good shape and doing wonderful in my recovery. He liked how my wounds were healing. He picked off one steri-strip from one wound and said the rest of the steri-strips would fall off over the next two weeks (I pulled the rest off myself when I got home).

Dr. Heymann instructed me to resume all normal activity and to walk, exercise, carry anything I liked (under 100 pounds) if I felt up to it. He gave me the green light for doing my jumping jacks again because he "wanted me moving and gliding" and I was honestly shocked, but thrilled, to oblige him as best I could.

I asked him about being catatonic in the hospital and why it happened. He checked my chart and said it must not have been that important because the nurses didn't mention it to him the day of my surgery.

I asked him why my surgery lasted three hours instead of an hour and a half. His eyes narrowed and he said in a stern and even tone, "If you want me to work on you for an hour and a half like a machine, that's fine, but I prefer to work until I'm satisfied the repairs are done right."

He continued...

"Just because you were in the Operating Room for three hours doesn't mean you were being operated on for three hours. Maybe there was a technical problem. Maybe something else happened that delayed you. Don't judge the quality of your surgery by a clock on a wall."

I nodded and checked that concern off my list. I told him I felt like I had a tilted board along my pelvis and that I loved how strong that felt. Dr. Heymann told me that board would loosen up in the future. I was a little disappointed in hearing that, but I moved on to my next question.

"I am forgetting words and having trouble speaking numbers," I told him. He looked puzzled and wrote that down in his chart. Dr. Heymann told me I may have had a bad reaction to the anesthesia but he assured me that my reaction was not terribly unusual. He went on to state that members of his own family have had worse reactions to anesthesia.

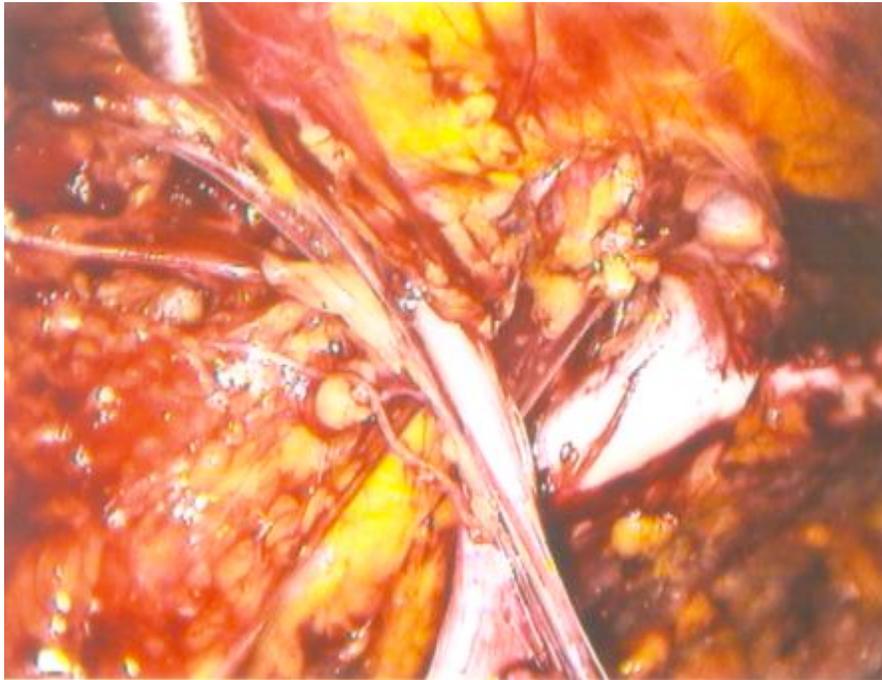
I told him about the pain medication not working and he made another note in my chart and told me I must have a bad reaction to medication as well as anesthesia. He also told me I shouldn't expect pain medication to make all the pain go away. I agreed with him in theory, but stated that nothing I was given in the hospital or prescribed by him lessened any pain I had one iota, so why bother giving me anything at all?

Dr. Heymann suggested I use meditation to help ease my pain and I confirmed I'd been practicing self-hypnosis for over two years. While self-hypnosis helped, it doesn't continually get to the gut of constant, short-term, pain like medication can.

I then informed him that Aleve made me dizzy and nauseous. Dr. Heymann told me he loves Aleve. He takes one Aleve every day he goes skiing. He asked if I took Aleve with food? I said the Aleve instructions don't say you have to take it with food, so I didn't. Dr. Heymann told me to take Aleve with food sometime to see if that helped. He also said that if Extra-Strength Tylenol helps better, then keep using that.

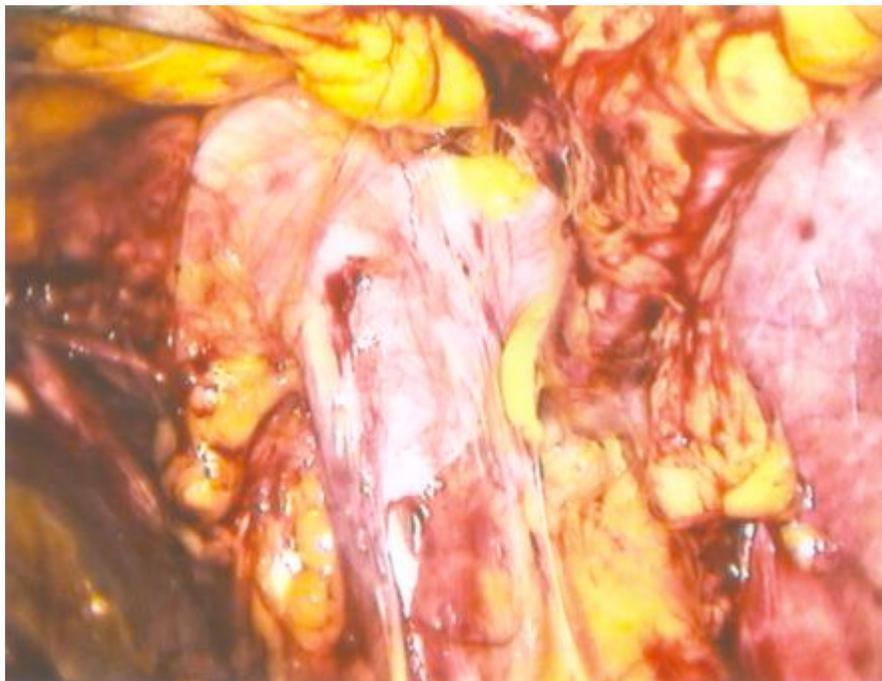
I asked him how soon scar tissue would start growing into the plastic mesh to form my new "steel" layer. Dr. Heymann told me it was already happening. In fact, he said if there were a problem and he had to go back in for some reason, it would be "very difficult" to deal with that plastic mesh since it had already become a part of my body.

Dr. Heymann then shared a series of electronic images he took of my Laparoscopic surgery and I will share some of them with you now. The first image you see below is the walnut sized hernia on my left side. Note that these images are greatly enhanced and enlarged to show detail.



The following image is the lemon-sized hernia on my right side.

There's actually another smaller hernia on this side as well.



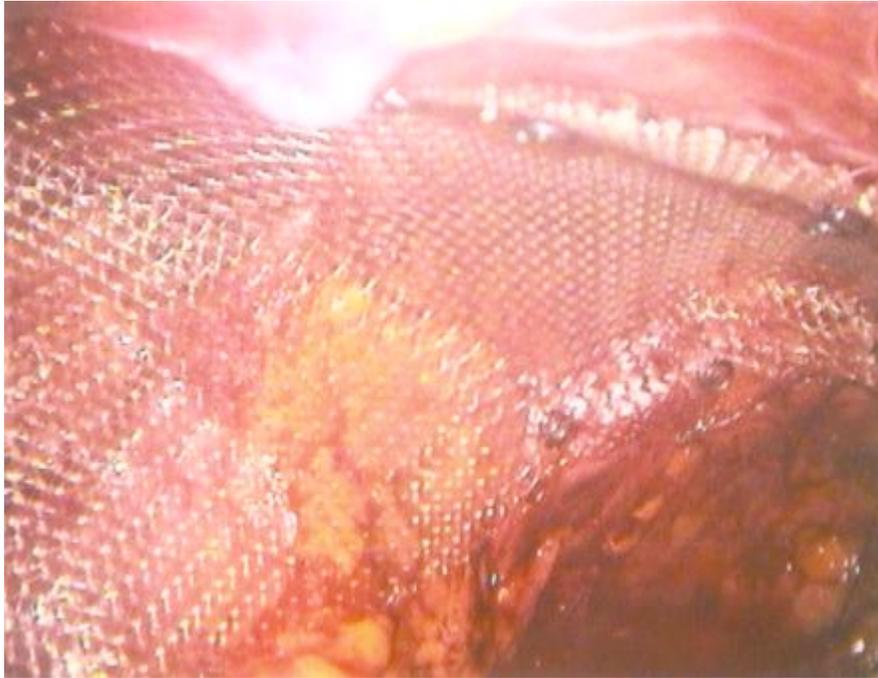
The next image is the repair done on my left side.

Notice the plastic mesh?

It looks like a Knight's chain mail.

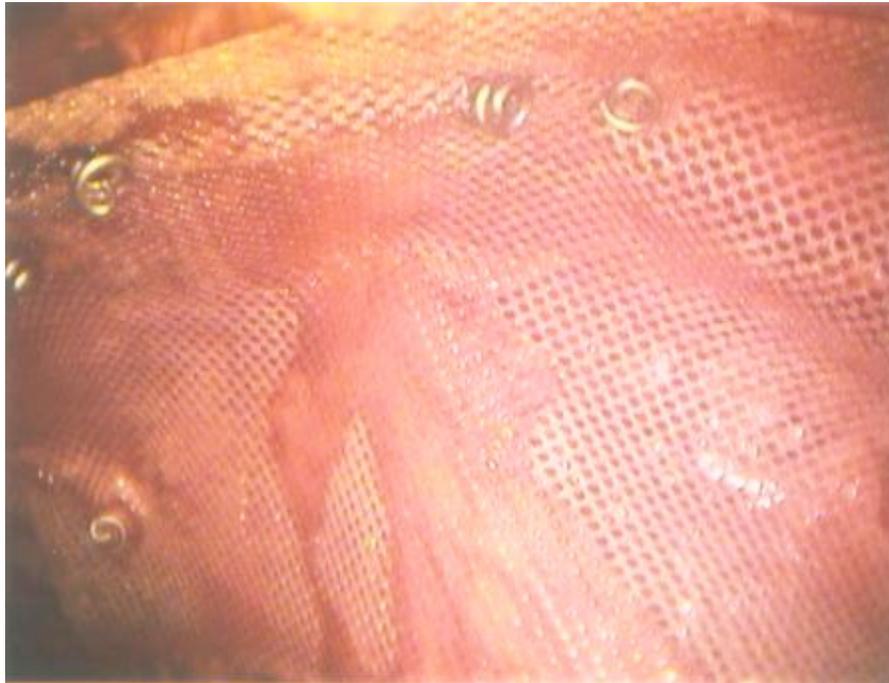
The titanium tacks (that look like corkscrews) can be seen peppering the edges of the mesh to hold it in place.

There are about ten tacks on each side.



Here is the repair for the right side.

You can really see how the titanium tacks screw into my body in a variety of interesting angles.



It was difficult sharing these images with you. You can't get more private than exposing your innards. But, I thought showing you the hernias and their repair in detail would be the most informative.

#### **Post-Op Second Thursday**

I put my jock back on. I used the large jock the hospital gave me, not the small one I purchased before surgery for the purpose of wearing it expressly for this stage of my recovery. I was still too bloated to wear the small size.

I did jumping jacks for the first time and OUCH! That hurt! Every sliver of blubber I had in my body seemed to move and ripple and jiggle into my abdomen. After I did 100 jumping jacks I decided not to do that again for awhile.

I took Aleve again (this time I took it with food) and my right leg felt 100% better within 45 minutes. Dr. Heymann was right again. I was still forgetting words and that was frustrating. Numbers were getting better. I spoke a phone number aloud as I dialed it and that seemed to get my speech and my motor functions working together again.

I decided to do another "hand on" test and this one was more difficult and frustrating. It took three attempts to get the plumbing to deliver a result. I stayed erect during all three attempts, but the first two attempts came up dry, as if something were impeding the natural flow of fluid. I was grateful when the results finally surfaced and this time the viscosity seemed to be what it was before I had the surgery.

### **Post-Op Second Friday**

I felt the results of my jumping jacks yesterday. I took some Aleve to mute the pain in my abdomen. I went back to ice packs to soothe the discomfort. I still couldn't stretch out fully with my arms above my head because my abdominal muscles were tight: I felt a tugging on both sides of my pubic bone. Words did not yet readily come and that bothered me. I got on my exercise mat flat on my back and held my hands above my head and I breathed. I took a half an hour to slowly stretch my torso muscles so they would relax and even out a bit.

### **Post-Op Second Saturday**

I took an hour walk outside alone. It went well. My large jock was fulfilling its duty: My pre-op underwear still didn't fit. I noticed my wounds were puckering as they healed and I made a note to ask Dr. Heymann about that. I was still forgetting words.

### **Post-Op Second Sunday**

I had a good day! I wore no underwear and no jock. Everything felt better that way. I could finally stretch my torso without feeling anything pinch or pull. My wife and I re-consummated our love and it was wonderful. For the first time in two years I didn't have discomfort "meeting" my wife head on pubic bone to pubic bone. I'm certain we could've safely tested this earlier, but I didn't have the stamina.

I was amazed at how my body had adapted to keep this special covenant alive despite the fact that every time we "met" it was smacking dead-on my right side hernia. The body is a beautiful and majestic thing that adapts to let you get done what you need to get done despite it not being able to perform perfectly as designed. The body knows and accepts the fact we are not our bodies.

### **Post-Op Second Monday**

I carried my first big bags of groceries home. I had twenty pounds bags in each hand and I walked the eight blocks home without a problem. I felt strong and sure everywhere. I powerwalked outside for a full hour and a half to test my stamina. I did well. I did jumping jacks and, while they hurt as my abdomen jiggled, I was able to finish the routine without too much lingering pain. I couldn't stand and flex my stomach muscles without pain around the Laparoscopic entry points, but flat on my back I could flex my abs without any pain.

My bloating was gone and I finally wore my new small size jock. While my right leg was feeling better, I had a new pain in my left leg. I must have pulled something doing my exercises.

### **End of the Second Week**

It had been two weeks since surgery. I finally felt good again. Actually, I felt better than normal since I'd been dealing with right side pain and right testicle discomfort and constipation for over two years without resolution. I lost the three pounds I gained! While my stamina was returning, I still had trouble finishing sentences and thinking of words. My numbers problem appears to have faded. My left leg still hurt when I lifted it. My spine was still sore from the epidural.

### **One Month Check Up**

I went to see Dr. Heymann for my one month check up and he was, once again, extremely positive and happy about the progress I was making. He checked my hernias and asked me to bear down as hard as I could as if I were lifting 1,000 pounds. Dr. Heymann declared me "in better shape than 99% of the world."

I showed him where I was feeling some pain along my right side when I did a twisting sit up (but not a straight sit up) and Dr. Heymann told me that was residual "healing pain" and exercising was a good thing to do to promote quicker healing.

### **Healing Wounds**

I asked Dr. Heymann to take a look at my wounds healing into scars. He said they looked great and explained their bright red color was normal because the blood vessels were working to heal the wounds. I'd been using Karin Herzog's Vita-A-Kombi 3 Cream to oxygenate my wounds three times a day to lessen scarring and to promote faster healing. I had some suture material sticking out of my bellybutton incision and he clipped most of it off and told me the sutures inside my body had already dissolved.

I showed him how, when I did a sit up, my incisions puckered. Dr. Heymann said that was normal and so were the little "bumps" I felt directly under the wounds. Everything would fade away by the end the summer. He showed me what once must've been a long, nasty scar along the web between his right thumb and right index finger. His scar had faded to a soft white and Dr. Heymann said my incision wounds would fade in a similar manner. I asked him what had happened. He told me a skiing accident destroyed his hand. I asked him if he was worried about ever being able to do surgery again. He said he was certainly concerned and that his hand took four months to heal. He then took my hand in his and gave me a crushing good-bye handshake. I winced. He winked and said, "Now it's bionic."

### **About Anesthesia**

During the cab ride home, I pondered my adverse reaction to anesthesia. It really messed up my mind, but after speaking to some of my friends about their surgical nightmares with anesthesia, I surmised my experience was not unique.

One friend in Florida had a hysterectomy and her surgery was supposed to last one hour but it took three hours instead. When she asked one of the nurses why her surgery took three times longer than expected, she was told, "You wouldn't go under. It took us two hours of trying to get the anesthesia to have an effect on you." My friend told me it took her five years to get her appetite back, a fact her doctor accredited to her adverse reaction to the anesthesia during surgery.

Another friend of mine had a similar anesthesia nightmare. She shattered her foot and for five days she would only awaken in the hospital to request more pain medication before she'd pass out again. For a year she could not remember the name of the hospital where she'd had surgery. Her doctor blamed that very specific memory loss on the after effects of anesthesia. Anesthesia, it seems, is a nasty, unpredictable -- but utterly necessary -- evil.

### **Lessons Learned**

Here's a short list of tips for successful bilateral Laparoscopic hernia surgery with Dr. Heymann:

- Dr. Heymann is always right. Listen to him above all others including Lenox Hill.
- Buy sweat pants and a jock TWO SIZES too big to ensure total comfort.
- Anesthesia affects everyone differently so don't sweat what you can't yet know.
- Don't expect your pain medication to actually lessen your pain.
- Be a real man and use a wheelchair whenever one is offered.
- Take Aleve with food to nullify nausea and dizziness.

**Conclusion**

I'm thrilled my bilateral hernias are now history. My left leg pain is almost gone. My spine is feeling better. My stamina is normal. It was a fascinating experience getting my hernias fixed Laparoscopically and I thank Dr. Heymann for taking extra time to explain the procedure to me for this article. It takes a great and gentle man to fix me up so expertly and then let me tell my full, uncensored, story here -- the pain, the healing and the lessons learned -- so you can better understand the previously undisclosed details of surviving Laparoscopic bilateral hernia surgery.