

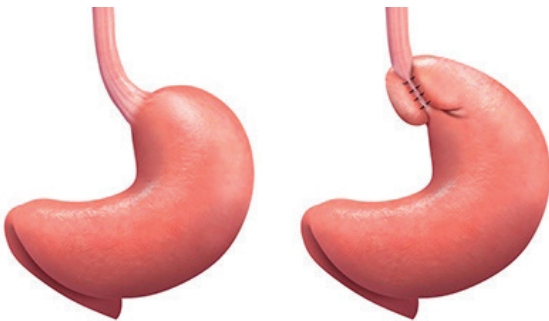
# Fundoplication Surgery

Fundoplication is a surgical procedure used to treat severe gastro-oesophageal reflux disease (GORD). If not treated, this disease can cause vomiting, repeat chest infections, aspiration, failure to thrive, dental erosion and extreme irritability.

In the event of an emergency please call an ambulance or take your child to the nearest hospital emergency department

## What is a Fundoplication?

Fundoplication involves wrapping the top part of the stomach around the lower part of the oesophagus to prevent GORD. Permanent stitches are used to hold the stomach in place. It can be performed as either an open or a laparoscopic (keyhole) procedure. A gastrostomy which is used to provide feeds may also be formed.



## Length of hospital stay

Two to four days is expected length of stay

The aim of the operation is to:

- Enable your child to have relief from ongoing heart burn and gastro oesophageal reflux disease
- Enable your child to eat a wider variety of foods
- Reduce vomiting
- Maintain a healthy weight

## Length of Surgery

Your child will be away from you in surgery and the recovery room for approximately two hours.

## What to expect after the operation

### Pain Management

Pain relief medicine may be given through a pump that is connected to a plastic tube in your child's vein (also called an intravenous drip or IV). As your child recovers, the pain will become less and they will need less pain relief medicine.

Once your child is allowed to eat, the pain relief medicine through the pump can be swapped for syrup or tablets.

### Nausea and vomiting

- Your child may have some nausea and vomiting after surgery. Medications can be given to help this, so please tell your nurse if your child feels sick or vomits
- Most children can burp within weeks of the surgery
- Children usually will not be able to vomit 6-9 months following the surgery
- If your child is continually trying to vomit or experiences gagging contact your doctor or the Surgical Registrar at the Women's and Children's Hospital on 8161 7000

### Wound care

Steri-strips and a clear film dressing (Tegaderm) will be on the wound and stay on for 5-7 days. Sutures (stitches) used in the procedure to close the wound are dissolvable and will not require removal. Your child can shower 2 days after surgery.

### Hydration

Your child will return to the ward with fluid running through an IV until they can eat and drink again. This is important to prevent dehydration. Once allowed by your child's doctor, encourage your child to drink.

## What can my child eat?

After having a fundoplication and being seen by your doctor, your child will start by drinking fluids. The child's doctor will decide when your child can start eating food with an aim to have a soft diet.

A soft diet includes food that your child does not need to chew and can be swallowed easily. It is still important to have a well-balanced diet while on a soft diet.

Soft diet options from the following food groups include:

### Milk and dairy products

Milkshakes, custards, Fruche™, yogurts, cheese, cheese spreads and cheese sauce

### Cereals

Breakfast cereal or porridge (softened with plenty of milk), well-cooked noodles or well-cooked soft pasta with a moist cheese or meat sauce, and soft bread (avoid chewy crusts)

### Fruit/vegetables

Include soft fruits and well cooked vegetables. Avoid raw vegetables and hard fruits for a few weeks. Try soft bananas, canned or stewed fruit, mashed potato, well-cooked carrot, broccoli or cheesy cauliflower

### Meat/chicken/fish/eggs/nuts/legumes

Avoid dry chewy meats or raw nuts. Add sauces or gravy to soft and tender meat or chicken. Good options are mince, tuna, soft fish, eggs or baked beans (e.g. tuna mornay, Shepherd's pie, spaghetti bolognese, omelette)

## What to expect at home

Remember that each child is different in their recovery. As your child's stomach size has been slightly reduced by the fundoplication, you may find they cannot tolerate as much food and fluids at one time. They may feel full quickly. To help your child eat well and keep a healthy weight:

- Eat small, frequent meals and snacks throughout the day
- Offer drinks after or in between meals
- Do not offer drinks with meals as this can make your child feel fuller more quickly
- Avoid fizzy drinks for a month or two as the gas can cause discomfort
- Eat and drink slowly, chewing all foods well. Avoid gulping
- If a food is difficult for your child to manage, leave it. Try the food again a week or so later
- Your child will gradually return to a "normal" diet at their own pace, and as guided by your doctor

**Pain management:** Give your child paracetamol (Panadol®) just when needed. This can be given every 4 to 6 hours but do not give more than a total of four doses in 24 hours.

If you have any concerns after your child's discharge please telephone your private consultant, local GP or the WCH on (08) 8161 7000 and ask to speak to the General Surgical Registrar on-call.

### Adapted from

Fundoplication Surgery, Women's and Children's Hospital: Adelaide

## For more information

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