

THE HERNIA BIBLE

A non-surgical
approach to
hernia
treatment

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Introduction

The Hernia Bible system came about because of growing doubts about the long-term safety of the surgery being offered for my hernia, and the difficulty of getting encouraging answers to my questions on the subject. By not choosing surgery, I began looking for alternative solutions. At the time, there were none on offer, so I studied what causes a hernia and set about finding a cure. Without suffering a recurrence of my hernia I can now go for long walks, carry heavy luggage, and do manual labour such as gardening, digging and lifting. I've lost weight, reduced my blood pressure and enjoy consistent good health. I'd like to invite you to read the rest of this guide to find out more.

This guide aims to help you achieve the same benefits that I did. There are some important reasons and benefits for not choosing surgery as a treatment option, unless absolutely necessary. The side effects and failure rates of hernia surgery are not widely known or discussed, but they are very real. I am thankful that I used an alternative approach instead, relying on a good support garment, and the right diet and exercises. I hope this guide will encourage you to follow this approach too, and I would be very glad to have your feedback.

How a hernia occurs

In males, about two months before birth, the testicles descend into the scrotum, passing through a gap in the groin, followed by the spermatic tubes, which later will convey sperm from the testicles to the penis. The gap is normally tightly closed and tensed, just relaxing enough to allow sperm to squeeze through but otherwise fitting pretty snugly together.

A hernia occurs when the gap weakens, usually from within. This can be caused by a number of superficial factors such as lifting a heavy weight or pulling something or overexerting oneself in sport. But that's just the straw that breaks the camel's back. The actual strain is something that develops over a prolonged period. If you read this before you develop a hernia then you can take steps to prevent it ever happening. If you have a hernia, knowing what it is can be the first step towards curing it.

The gap is called the 'inguinal canal.' It is 4 cm or about an inch and a half long. Sperm from the testicles passes up and through this gap and into the urethral canal where it is bulked up with extra fluids to help it swim more strongly. As the sperm passes through, the gap momentarily relaxes by a few mm of width, enough to let it pass, then closes tightly again. The outer ring that the sperm pass through is smaller than the internal ring. There are three layers of muscle holding this gap shut, like tightened sheets, ensuring that the gap stays shut when sperm isn't passing through. These muscles stretch right across the abdomen. Like tent ropes, they are anchored on the ribs and the hips. Their lower end is the inguinal ligament, a strong band that stretches from the hip to the crotch and holds the ends of the muscles down.

Coughing or lifting can strain the gap; the inguinal canal opens a bit and the peritoneum, or intestines, press through. This is the bulge of a hernia.

Is surgery always the best solution?

Most doctors, on diagnosing a hernia, advise immediate surgery and do not prescribe any other treatment or even a support garment. Of course without any support the hernia inevitably gets worse and widens as there is nothing to restrain the outward pressure against the inguinal canal.

Recently there are signs that views on surgery are changing. The *Journal of the American Medical Association* (March 2006 issue) published the results of a medical study on 720 men with hernias, which concluded that NO surgery was the best option for most*. If surgery is carried out, the complications tend to be frequent and severe, sometimes leaving the patient with lifelong pain. The authors of the study conclude that hernia surgery should not be carried out unless the hernia is bulging badly and very painful.

There are basically two types of surgery for hernias:

The Bassini Method (this is also the basis for the Shouldice method)

Involves sewing the sides of the inguinal gap together. The sutures can give way under strain and the damage caused by their insertion can weaken the flesh. The failure rate can be quite high, depending on who does the operation.

The Mesh Method

This involves folding a patch of plastic mesh over and under the inguinal gap and then stapling it down. Its success depends upon the body tissue growing in and around and through the mesh but this can also be a problem if the mesh has to be removed, since removal involves taking out a lot of body tissue as well.

Both methods can be performed by direct incision, i.e. cutting open the abdomen

}Recent data questions the routine elective repair of all inguinal hernias. Some studies indicate that inguinal hernias can be left to their own devices with no greater risk than prompt elective treatment.~

(from wikipedia, the online encyclopedia)

directly above the area of the hernia, or by laparoscopy, where a tube is inserted through a small hole and the operation is performed by remote control via a televised view of the area. The scar is smaller with laparoscopy, but the risk of error can be higher.

Hernia operations are often considered as an opportunity for junior doctors to get practice before moving on to more complicated operations such as heart surgery, brain surgery or kidney transplants. As a result the surgeon's inexperience can lead to less than satisfactory results.

A hernia operation is deemed successful if there is no bulge in the lower abdomen

*Source: *Journal of the American Medical Association*, 2006; 295: 285-92).

afterwards. This is regardless of whether you continue to suffer pain. They call the pain 'inguinodynia' but it hurts like toothache in your groin. Other side effects of surgery include impotence, numbness, reduced sexual sensitivity and incontinence. Many men have reported:

- Having to take strong painkillers for life
- Experiencing sharp pain in the groin when they cross their legs or sit down unevenly
- Being able to get an erection but finding it difficult to have an orgasm
- Being unable to get an erection
- Becoming incontinent
- Having odd tingling sensations in their legs, thighs and groin.

Some people have a good recovery after the operation and never think about the hernia again. They are the lucky ones and, depending on whose statistics you believe, they are in the vast majority. However, a Dutch report which was peer-reviewed and published in August 2000 in the prestigious *New England Journal of Medicine* tells a less encouraging story. This study compared hernia repair surgery using the mesh vs. stitch methods. It concluded that using mesh to repair hernias that result from surgery is more effective than stitches, but that the likelihood of hernia recurrence after both methods is fairly high, respectively 24% and 48%.

Causes of post-operative pain:

- Nerve damage during surgery or later entrapment in scar tissue
- Post-operative benign nerve tumors (Neuromas)
- Scar tissue or tissue damage
- Misplaced mesh (if used)
- Contracted, scarified and hardened mesh plugs ("Meshomas")
- Infection (usually noted early post-op.)
- Recurrent (or persistent) hernia.
- Constriction or narrowing of the internal inguinal ring around the spermatic cord

Periostitis-inflammation of the outer membrane of the pubic bone due to the presence of permanent suture material inadvertently placed into this layer resulting in chronic inflammation and pain

Pain from unrelated causes, associated with neither the prior inguinal hernia nor its operative repair (i.e., Non-hernia musculoskeletal, Intra-abdominal, Intra-pelvic, Neurologic, Genito-urinary, Infectious or Vascular origin etc.)

Rather than pain, numbness may also be a long-term complication. This arises when the nerves that would have caused pain have been deliberately cut. The numbness is experienced across the lower abdomen, in different places depending on which nerves are involved.

To conclude, doctors see their job as deciding on whether or not to recommend surgery. They can be very unhelpful about providing assistance in matters such as diet, exercise, posture, and even choosing a hernia support garment. These matters rarely form part of their training, and are considered nurses' work.

We hope that this guide can help remedy the lack of self-help advice given by doctors. Supporting your hernia with the right garment, posture, exercise and diet, together with cultivating a better understanding of your body, are very important in both preventing hernias and preventing their progression. Your next step towards wellness is to learn about posture and exercises which can help to improve the tightness of your inguinal canal.

Posture and exercises

For a successful hernia cure, your abdomen must be helped to tighten up and so reduce the outward pressure of sagging internal organs on your inguinal canal. A variety of muscles and body tissues are involved in maintaining the strength and structure of your 'undercarriage'. Your shoulders, aided by your rib cage, should act like a 'coat hanger' which suspends your abdomen so that it doesn't sag and weigh down on your pelvic floor and lower abdomen.

Two types of exercises are important:

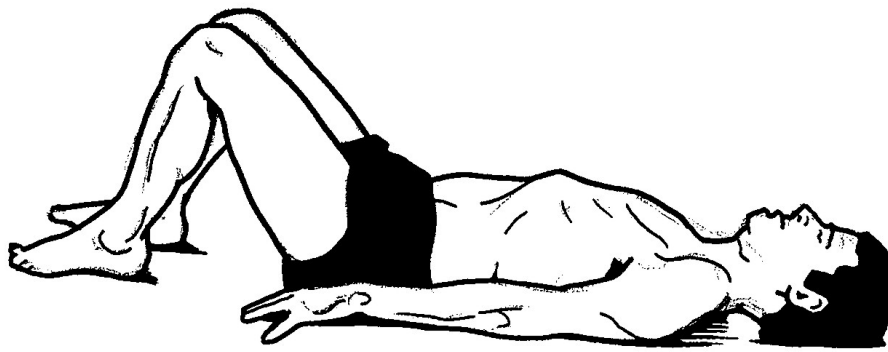
- Those to strengthen your lower abdomen, pelvic floor and transversus abdominal muscles
- Those to develop the links between your abdomen and your shoulders and rib cage.

Strengthening these links will help to pull you up as your pelvic floor and lower abdomen are pushed up. The following exercises form part of the Pilates technique, and are designed to fulfil this purpose. Pilates is a gentle technique which should never strain your muscles. As with all exercise systems, these exercises are best learned with a registered practitioner (see Resources on page 23). Once you have had a session or two with a teacher, you can use the descriptions given in this book to aid your memory as you practise at home.

Important

There are certain principles which are important for all these exercises. These involve concentration, breathing, centering, precision, isolation etc. and need to be demonstrated by a qualified Pilates instructor. The descriptions here should be used only as a memory aid.

1. Neutral Position



Lie on your back with your knees up. Practise pressing the small of your back into the floor, then practise arching your back a little. Now find a neutral position somewhere between the two. Your hipbone and pubic bone should be level so that you can imagine balancing a cup of tea on your tummy without it spilling. There should be a small gap under your back.

Now practise lateral thoracic breathing. This is done as follows: keeping your imaginary cup of tea in place, breathe in with your hands on your rib cage, and feel your ribs move up and out. Now exhale, pulling your ribs together and your tummy down. Keep your bottom and the front of your hips relaxed. This breathing engages your transverse abdominal muscles, also known as your core muscles.

Your transverse abdominal muscles are very important for preventing hernias. To feel these muscles work, tuck your fingers inside your hip-bone and cough (maintaining the neutral position). You will feel the muscles contract. Your transverse abdominals also contract automatically when you pull up your pelvic floor, for example when you want to stop yourself from urinating.

2. Pillow Squeeze



Lie in the neutral position with your knees bent up, and place a pillow between your knees. Remember to keep your imaginary cup of tea balanced on your tummy. Breathe in, then, as you breathe out, draw up your tummy and squeeze the pillow with your thighs without tilting your pelvis, before returning to the neutral position. Make sure when you squeeze that you are just engaging your inside thigh muscles; don't grip round your hips. Also keep your bottom relaxed and do not bunch up your tummy muscles while doing this exercise. It is very gentle and subtle.

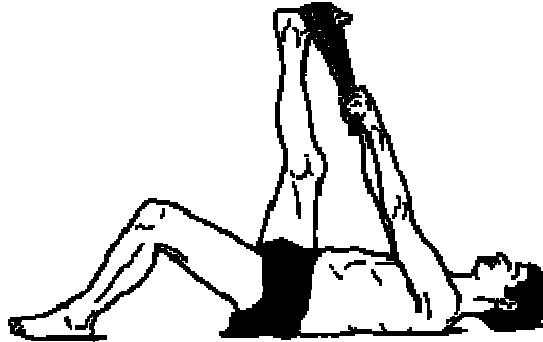
3. Shoulder Bridge



In the neutral position, keep your toes relaxed and on the floor, with the pillow still between your knees. Breathe in to prepare, then, as you breathe out, sink your spine into the floor and let your pubic bone float upwards, hollowing your tummy and pushing away into your knees. Don't use too much gripping force. Your hip flexors should be lengthened. Now lift your tailbone and gradually bring it up like lifting a bicycle chain from one end. Aim to make a straight line from shoulders to knees. When you get to the top, breathe in but don't over-extend your ribs. As you exhale, peel down from the top of your spine all the way back down, leaving your tailbone to come down into position last.

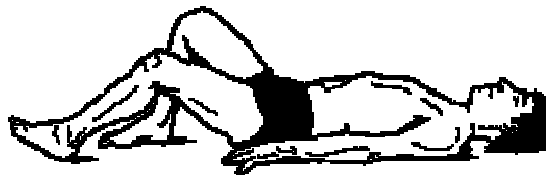
Keep the pillow in place while doing this exercise to help your knees stay together, and keep your toes relaxed.

4. Hamstring Stretch



Lie on your back with your knees bent. If your chin and forehead are not level when lying on the floor, put a small pillow or folded towel under your head. Lie in the neutral position. Lift up one leg, loop a towel around the foot while your leg is in the air, pull your toe back towards you, keeping your leg outstretched but without locking the knee. Pulling on the ends of the towel with your hands, pull your leg towards you until you can feel your hamstrings gently stretching, keeping your other leg bent on the floor. Hold your leg in this position for at least 30 seconds, trying to relax. Repeat with the other leg. Release the pressure on the towel, allow your leg to return to the starting position, then repeat with the other leg.

5. Leg Slide



From the neutral position, still balancing the imaginary cup of tea on your tummy, breathe in to prepare. As you breathe out, engage your transverse abdominals, and slide the heel slowly along the floor. Pause, then draw the leg back, inhale and repeat with your left leg. Keep the movements slow and controlled, and avoid arching your back. Your pelvis should be in the neutral position throughout this exercise.

6. Knee Opener



From the neutral position, check that your hip bones are level. Breathe in, then as you breathe out, open one knee sideways and out as far as you can while keeping your pelvis still. Breathe in as the knee comes back, still keeping your hips level. The movement should be slow and controlled. Bring the knee back up and repeat five times, then do the same with the other knee. This exercise helps to stabilise the pelvis.

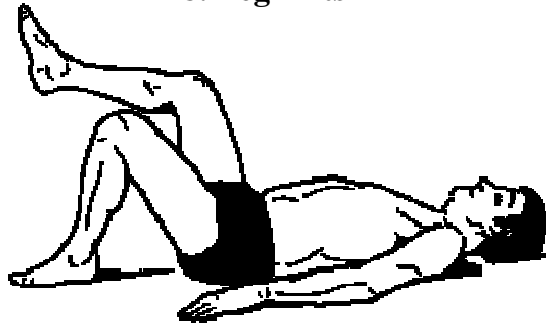
7. Hip Rolls



Start in the neutral position with your feet and knees apart. Take your arms out to the side and stabilise your shoulders. (Your shoulders affect the function of your transverse abdominal muscles). Breathe in, then as you breathe out, engage your tummy muscles and lower your knees sideways to the right, then back to neutral. Breathe in and repeat, this time lowering your knees to the left.

This exercise can also be done with feet together and pillow between knees.

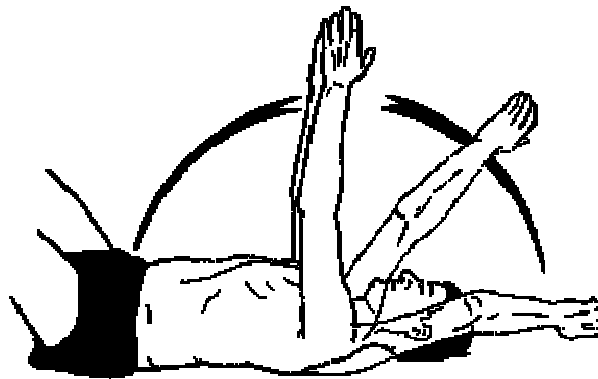
8. Leg Lifts



Start with your knees bent in the neutral position. Lift one leg, still keeping your back in the neutral position. Don't lift your knee too high. Breathe in while your leg is up. As you breathe out, lower the leg as if you are dipping your toe into a pool of water. (Do not arch your back.) Then bring the leg up again, breathing in as you do so. Repeat five times then do the same with the other leg. The movements should be very slow and controlled, and the most important thing in this exercise is to keep your back in the neutral position.

If you feel your back move, practise this exercise keeping your leg still without dipping, hold for five breaths, then change to the other leg.

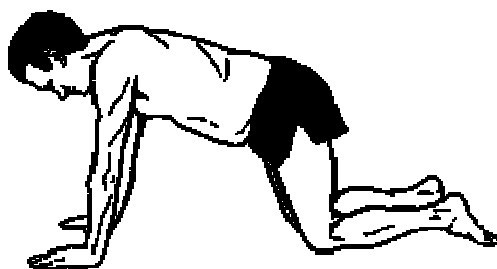
9. Shoulder Stabilization



Lie in the neutral position, with your arms in the air, palms facing each other. Breathe in, then exhale, drawing your ribcage down and bringing one arm over your head while keeping the other arm in the air. Avoid flaring your ribs and keep your back in the neutral position and your shoulders down.. This exercise can be done either with one arm at a time or by drawing circles with both arms.

Try adding a leg lift to make this more challenging, but do not lose the quality of your movement.

10. Prone (All Fours Breathing)



Kneel on the floor with your hands on the ground under your shoulders, your knees under your hips, and your back in a neutral position. Draw your shoulders away from your ears. Breathe in through your nose, gently releasing your tummy gently as you do so, then exhale through your mouth, drawing your tummy up towards your spine. Keep your back in neutral, without tilting or arching. You should feel your core muscles working.

11. Tummy Lift with Pillow Squeeze



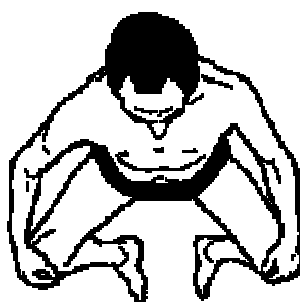
Lie on your front with a pillow between your thighs. Fold your hands and rest your forehead on them. Your shoulders should be open and relaxed, your toes together and your heels apart. Breathe in, feeling your spine lengthen. Breathe out, gently pulling up your tummy muscles, keeping your hips and pubic bone on the floor. Squeeze the pillow with your inside thighs, and gently tighten your buttocks. Breathe in keeping it all held in position, then breathe out and relax.

12. Piriformis Stretch



From the neutral position lying on your back, lift your right leg, drop the knee outwards and place the right ankle on the left knee. Clasp your hands around the back of your left thigh and draw the thigh towards you. (You can also do this by looping a towel around the back of the thigh and pulling on it.) Hold this position for about 30 seconds, feeling the stretch up your right thigh into your buttock. Relaxing while you do this will help to reduce any discomfort.

13. Adductor Stretch



Lie on your back and draw your knees towards your shoulders, keeping your tail bone down. Hold your knees with your hands and open your knees out to the sides. Hold the stretch for 30 seconds.

The Hernia Diet

Helping to prevent internal organs from sagging is not just about external support. The more food you eat, the more space your abdominal contents require and so the more outward and downward pressure they can apply to weaken your abdominal wall at its weakest point—your inguinal canal. Smoking and a poor quality diet can also weaken the collagen and elastin proteins which keep the structural connective tissue of your abdominal wall strong and elastic.

Some foods slow down the passage of food through your digestive system, creating high-pressure ‘traffic jams’ of food waiting to get through. Foods low in fibre and rich in sticky gluten, such as white bread and pastries are the worst offenders. It’s important to get your food in and out quickly and not to have unwanted waste increasing even further the size of your abdomen. A lack of dietary fibre also forces you to strain at stool, which greatly increases internal pressure.

The principles of the hernia diet are:

- Reduce the overall quantity of food you eat.
- Eat mostly foods which are easily digested and pass quickly through your digestive system. These help to speed up the amount of time food stays in your intestines (“transit” time), and makes bowel motions soft and easy.
- Eat foods which help to reduce gas and lubricate your intestines.
- Eat foods rich in nutrients which help to maintain the integrity of collagen and elastin in your abdominal wall.

Consider eating only two meals a day instead of three. Skipping breakfast will result in your intestines only containing one meal’s worth of food by lunchtime (if you’re on an 18-hour transit time). Your previous day’s lunch will have been evacuated and all you’re carrying is your evening meal. This greatly reduces the volume of your abdomen and the pressure on your inguinal gap.

- Never unduly postpone a bowel movement. Try not to strain at stool, and if you do, hold your hernia firmly with two fingers to make sure it doesn’t pop out.

Reducing food quantity and abdominal pressure

Quality and quantity are two sides of the same coin. The lower the quality of what you eat, the higher the amount you need in order to be nourished. Digestion of food is a process that uses a lot of energy and a lot of valuable minerals, vitamins and other nutrients. So the more you eat, the more you need to eat just to keep your digestive system working. It’s a vicious circle. No wonder people get the munchies and obesity is rampant. The denatured, refined and overly processed food that we often eat is aptly named ‘junk’ food. A junkie is a person who has become addicted to something that can never satisfy their need, so they have to repeatedly return for more. Refined foods such as white flour products and sugar are severely lacking in vitamins and minerals and create a dependency on energy derived from continual eating to replenish blood sugar levels. This leads to over-consumption of these starchy calorie-rich carbohydrates, and escalating levels of blood fats and body fat formed from the excess

carbohydrates. The best approach is to consume less food, less often and to make sure it's nutrient-rich and contains enough fibre. Once you have become accustomed to eating better quality foods you are less likely to crave junk foods. You will find that they lack flavour and don't really satisfy you. Adopting a healthier diet can have considerable gastronomic as well as health benefits.

Excess intestinal gas also puts pressure on your abdominal wall. Most intestinal gas is said to come from air swallowed while eating, so try to control this. If you eat beans and pulses, make sure that they have been soaked for at least 18 hours and that they have been boiled until soft all the way through. This helps reduce their gas-forming effects.

Controlling appetite

One way to control appetite is to skip breakfast. Historically, in agricultural societies, 'break fast' was something you did in the early afternoon, after completing your day's work. If you started at 6, by the ninth hour, or 'noon' (Latin for nine) you'd earned your rest and it was time to replenish by breaking the fast since the previous day's supper.

If you eat a meal at around 8 p.m. the glucose energy digested from that meal sustains you beyond bedtime. Then, as blood sugar falls, enzymes in your liver transform its stored glycogen into glucose, which then kicks in and keeps you going until you wake up. When your liver runs out of glycogen, around 7 a.m. another process kicks in that converts fat to glucose and thereby maintains the supply of energy. It's a wonderful mechanism and helps to keep the body's fat levels in balance. It is also the mechanism on which the Atkins Diet and other low carbohydrate diets are based. Maybe we should call it the Slim-ergy Cycle. Like any other part of your body, if you don't use it, it gets lazy. Exercise it regularly by skipping breakfast and after a week or so it starts to really deliver the goods: you won't feel hungry. (If you do, try eating a couple of squares of 70% dark chocolate for elevenses.) You should then find that at lunchtime you eat with a genuine appetite, rather than out of habit and with a jaded palate that needs sugar breakfast cereals, bacon and orange juice to arouse its interest.

Transit time

Cows and sheep eat a wholesome diet. They have no choice as farmers dictate the optimum diet for health and growth. So their meat can provide readily available, albeit second hand, nutrients from a wide variety of grasses and meadowland plants. But meat, particularly fatty meat such as in burgers, takes a long time to digest and so slows down the transit time of meals through your digestive system. Cheese has a similar effect.

Foods made from white flour, such as white bread, cakes, pastries and biscuits, contain high levels of gluten, a protein which is both hard to digest and clings to the mucous membranes of your intestines (a mixture of flour and water is so sticky that it can be used as wallpaper paste). These sticky deposits can reduce the ability of your

(Continued on page 20)

Helpful foods for people with hernias

Buckwheat	This grain (available from health food stores) can be cooked and eaten like rice. It a concentrated source of complex carbohydrate, fibre-rich, and also contains rutin, a flavonoid which works with vitamin C to strengthen small blood vessels. This is important as the hernia repair process requires a good supply of blood to the hernia area.
Fennel	Fennel bulbs (eaten as a vegetable) and fennel seeds have a carminative effect (help to reduce gas in the digestive system). Gas takes up space and increases the outward pressure on the inguinal ring. Eat fresh fennel raw in salads, roasted or steamed, and boil fennel seeds for at least 5 minutes to obtain a strong-flavoured and naturally sweet tea. Other carminative seeds are dill, caraway, cumin and other umbelliferous seeds. They can also be used in cookery.
Fish and seafood	These are among the best and healthiest sources of zinc, copper and other minerals which your body needs to make collagen.
Flax seeds	Flax seeds are rich in mucilaginous fibre. Crack the seeds under a rolling pin, then pour boiling water over them and allow them to cool. The seeds will become sticky and can then be added to breads, soups, stews and salads. They are rich in essential polyunsaturated oils and help to prevent constipation.
Fruit	A regular daily consumption of fruit or fruit juice helps to ensure that you get the vitamin C which your body needs to maintain the integrity of connective tissue in your abdominal wall, and aid hernia repair. Remember that smoking rapidly uses up vitamin C, which is why smokers are more likely to get hernias and recurrences of hernias after surgery.
Liquorice	Made into tea, the real herbal root of liquorice (not the dyed corn starch candy, which is actually flavoured with aniseed) has a laxative, intestinal soothing effect. Natural liquorice has a tendency to raise blood pressure, so use with caution.
Nuts	Together with sunflower and sesame seeds, these are the best all-round sources of zinc, copper, calcium, magnesium and arginine—nutrients which your body needs to make collagen for strong connective tissue.
Psyllium husks	One dessert-spoon whisked into a large glass of water will absorb 100 times its weight in water and help to make your intestinal contents very slippery so they move faster through your digestive system and prevent constipation. The whole, unpowdered husks are easiest to use. If not available in your local health food store, try the Phyto-Pharmaceuticals brand which can be obtained by mail order from the Nutri Centre (see Resources on page 23).
Seaweed	Seaweed is also a good source of minerals, particularly iodine. Many people find that regular seaweed consumption helps to maintain a high

	<p>level of energy and to reduce cravings for sugar and other quick carbohydrate foods. The nori seaweed used to make sushi is good, especially if you can get brown rice sushi. Hiziki is the finest seaweed of all, delicious if soaked, then cooked with ginger and garlic and lightly sweetened. Wakame seaweed can be bought dried from health food stores, broken into small pieces and added to soup. If eating seaweed lacks appeal, simply buy kelp granules at a health food shop and sprinkle them into soups or other foods. You won't notice the taste, but you will notice the difference they make to your health. Caution: seaweed is very concentrated. You only need a small amount so don't overdo it.</p>
Umeboshi plums	<p>The Japanese pickle immature plums which are rich in sorbic acid, an anti-fungal that controls yeast and fungal populations in the intestines, thereby helping the 'friendly' bacteria to work better. Umeboshi plums are available from macrobiotic suppliers such as Clearspring (see Resources on page 23). They are best eaten as a soup thickened with a Japanese root known as kuzu. De-seed four umeboshi plums and boil for five minutes in 500 ml water. Stir one tbsp kuzu into ½ cup water until all lumps are gone. Add the kuzu to the umeboshi water and bring back to the boil, stirring well. Eat a bowlful of this soup between meals to obtain maximum benefit.</p>
Vegetables	<p>Vegetables contain vitamins, minerals, antioxidants, flavonoids and other nutrients that help us to function at optimal levels. Our evolution as hunter-gatherers probably relied a lot more on gathering than hunting, as the technology required to capture a wild apple is far more reliable than that required to capture a rabbit. So our digestive systems evolved to make the best use of a wide range of vegetarian foods. Leafy green vegetables such as cabbage, spinach, lettuce and kale are a particularly good source of the mineral magnesium. A lack of magnesium weakens connective tissue and increases the risk of recurrent hernias and ruptures. Have you thought of going organic? Research consistently shows that organically grown vegetables have 50% and more higher levels of essential vitamins and minerals than vegetables grown with chemical fertilizers.</p>
Whole-grains	<p>Because they provide so much nutrition in every mouthful, wholegrains help to prevent the food cravings that tend to be associated with eating refined cereals and white bread. The best type of bread is stone-ground, wholemeal bread. Wheatgerm bread is also good, but granary bread is mostly white bread with brown colouring. Oats and oatmeal in particular are an excellent source of magnesium, so try to include these in your diet.</p>
Yoghurt and probiotics	<p>Live yoghurts and probiotic products such as Actimel and Yakult contain the so-called "friendly" bacteria which help to keep your intestines healthy and prevent constipation.</p>

intestines to absorb nutrients. They also slow the peristaltic action of your intestines and slow down the passage of food, making excretion more difficult. The resultant straining of the bowels should be avoided during hernia recovery. The longer food takes to pass through, the more of it is accumulating inside you, with consequent increased pressure against your hernia from within.

Fried foods which become hardened or crispy also take a long time to digest. This is because the water content is driven out of their surface, making its breakdown by digestive enzymes much more difficult.

It will help your transit time if you eat the above foods sparingly, and always as part of a meal containing high fibre foods such as wholemeal bread or pasta, and vegetables such as cabbage, brussels sprouts or broccoli. A diet that is high in fibre, wholegrains, vegetables and fruit and low in dairy products, meat, white flour and sugary foods will assist in reducing your transit time to 12 hours or so and in reducing your overall appetite. In turn this reduces the volume of your abdominal contents, and the outward pressure on your deep inguinal ring.

Check your transit time.

The quickest way to assess your diet is to measure your transit time and to study your stools. This is easy and best done with sweet corn. At eight pm, eat a light meal that contains a cupful of sweet corn (you can buy it in glass jars, tins or fresh). Don't chew the corn too much. Swallow as many whole kernels as you can manage. Ideally the corn will emerge in visible form in your stools 12-18 hours later.

Some people try doing this with beetroot as a marker, but this is not suitable. The colour of beetroot travels faster than the actual beetroot, so the appearance of a red colour in the stools is not reliable evidence of the food's transit time.

If your transit time is longer than 18 hours, then either your intestines are flabby, swollen and weak, or there is too much food or deposits blocking your alimentary canal.

If, despite eating fibre-rich nutritious foods, you find that constipation is still a problem and you can't get your transit time down to 12-18 hours, then products such as psyllium husks, flax seeds, prunes, figs etc. are helpful. Epsom salts and herbal laxatives can also be used in the short term, but beware of becoming dependent on them.

Your stools

Your stools should come out in an easy, steady, relaxed motion and should float on the surface of water. Always, always go to the toilet as soon as you feel the urge. Otherwise stools can dry out inside you and become harder to expel. The increased tension in the anus contributes to this result. If you have a bidet, use it not just for cleanliness, but to ensure full evacuation. A splash of warm water can relax the anus and lead to an unexpected further evacuation.

You may feel that, because of historic eating excesses, that it is worth having colonic irrigation to remove the deposits that build up in the large intestine. By all means do so, with a registered practitioner, but don't overdo it. Removing deposits

increases the absorptive capacity of your large intestine and so helps to reduce your need for food.

Collagen and your abdominal wall strength

The strength and integrity of your abdominal wall depends on the strength and integrity of the collagen and elastin proteins which are its main structural components. For optimal collagen integrity, your body needs an ample daily supply of the following nutrients:

Vitamins

Vitamin A, Vitamin C

Minerals

Calcium, magnesium, zinc, copper, sulphur,

Amino acids

Arginine

Research shows that smokers have a higher risk of rupture and hernia because of coughing, and also because smoking reduces levels of vitamin C in the blood.

Herbs

The herbs herniaria and English comfrey can also help to maintain healthy collagen. They can be purchased as tinctures, or you can grow comfrey as a vegetable and eat the leaves and stalks. Fennel (already mentioned under Foods) can be purchased as herbal teabags.

Hernia Supports

To prevent your hernia from enlarging, the importance of wearing a suitable support garment cannot be over-emphasised. However, many doctors and surgeons simply don't bother to prescribe a truss. Many trusses use metal springs to apply pressure to the hernia, via a pad which can be quite hard, and usually bulges into the hernia. This inward bulging prevents the edges of the hernia from coming together, and can even enlarge it. This makes it difficult for the hernia to heal itself. On the other hand your hernia will also enlarge if you do not wear some kind of support to keep it in.

Most trusses must be initially fitted by an experienced fitter. Careful measurements must be taken before the fitting, with the patient undressed and standing up. Then the hernia must be reduced by getting the patient to lie down and if necessary gently applying pressure with a finger. Even so, all these measures may not be enough. According to one surgeon: "It's nearly impossible to get a truss to fit in such a way as to keep the hernia in at all times. So don't bother".

Clearly the problem would be solved if you could find a hernia support that fits well, is comfortable, unobtrusive, keeps the hernia in at all times, and does not have springs or pads that bulge inwards. We believe that, after years of development and testing on people with hernias, this product is now available, and is known as the Flat Pad Support.

The Flat Pad Support—A new innovation in inguinal hernia care

The Flat Pad Support is based on an original design by Trevor Walker, who tested his unique concept of double flat pads on his own inguinal hernia. We have modified the design to improve comfort without compromising effectiveness. Described by many customers as more comfortable and effective than anything else they have tried, the Flat Pad Support is designed to prevent pain and prevent your hernia from getting worse. In many cases it can also prevent the need for surgery. It slips on easily, without any need for adjustment or a special fitter, and cannot be seen under clothes.

The Flat Pad Support is ideal for those who

- Want to prevent their hernia from deteriorating while they wait for surgery
- Want to avoid surgery altogether
- Want to wear their hernia support as discreetly as possible
- People who do not want their hernia to curtail their normal activities, job or sports.

Karate, building work, cycling, swimming, climbing, water-skiing, heavy lifting and digging the garden—our customers do it all.

The Flat Pad Support has unique design features

Some hernia belts, trusses or supports have rounded pads or springs which press into the hernia itself. This can increase the risk of enlarging the hernia. Our design instead uses unique flat pads which support the hernia but never dig into it. The pads overlap ensuring that they lie firmly against the lower abdomen, no matter what the position of the body, allowing the hernia to come together. Being flat, the pads cannot intrude into the hernia to cause discomfort. With use, wearers report that it becomes even more effective and comfortable. The holding garment encourages improved posture of the abdomen and lower back.

It took several years to perfect our design. Unlike many designs, there is nothing to dig into the hernia to cause more discomfort and worsen the situation. It is designed by people who have had hernias for people with hernias. Our best and most encouraging recommendation has been our high level of repeat orders—many from people whose work is physically active and have found that the Flat Pad support suits them best. Here is just one of the many unsolicited testimonials we have received:

"To say 'thank you' for marketing such a superbly designed support as this seems totally inadequate. It is without doubt the finest appliance on the market today. I have spent a small fortune in the past few years on different types of supports, only to find that for one reason or another they were unsuitable. I only wish I had known about your product sooner. Your claim that it will hold the hernia in, regardless of the position of the body, is entirely justified. I have given it every test I can, from digging the garden to riding a bicycle (pursuits which I had to give up for some time) and it has proved to be utterly reliable."

To provide the correct tension, the elastic of our Flat Pad Supports is custom-made

in our factory in Nottingham, England. The garments are then individually stitched by experienced surgical seamsters.

The Flat Pad Support is available by mail order only, from

The Support Company
32 Wellington Square
Hastings

East Sussex TN34 1PN
United Kingdom

www.thesupportcompany-uk.com

Email: sales@thesupportcompany-uk.com

Enquiries by post or email only please, to ensure that your enquiry reaches the right individual. Four-week money-back guarantee.

Baume Phoenicienne

A massage balm based on a recipe found in very old traditional writings, which make reference to therapeutic oils and ointments originating back to the Phoenicians. It consists of a penetrating oil containing extracts of specific plants, resins of plants and natural substances, which help to maintain the good health of the abdominal wall and its muscle fibres, tonicity and tightness of structure. Used by many people with inguinal and other types of hernia. Available from www.groin-hernia.com/baume.html

Other Resources

Health foods, herbal products, psyllium husks, fennel seeds, flax seeds, dried seaweed, liquorice tea, food supplements: ask at your local health food store.

Herbal and health products mail order suppliers (UK)

The Nutri Centre

7 Park Crescent, London, W1B 1PF

Telephone: +44 (0)20 7436 5122

www.nutricentre.com

Macrobiotic foods

Clearspring Ltd (macrobiotic supplies)

19A Acton Park Estate, London W3 7QE

Tel: +44 (0)20 8749 1781

Pilates Training

To find a Pilates teacher in your area, contact

The PILATESfoundation® UK Limited

PO Box 58235, London N1 5UY

Telephone: 07071 781 859

www.pilatesfoundation.com

