



Mr Maurice Brygel is the founder of the Sydney Hernia Centre and **Melbourne Hernia Clinic**. Melbourne Hernia Clinic is Australia's first hernia clinic established over 20 years ago.

Both Clinics specialise in:

- ~ **Day surgery**
- ~ **Local anaesthesia**
- ~ **Mesh reinforcement**
- ~ **Prompt return to work**
- ~ **Insured and non-insured patients**



What Are Hernias?

We usually apply this term when any part of the abdominal contents protrude through the abdominal wall. Hernias usually cause discomfort or a swelling.

Occasionally they are first found during a routine medical examination. The swelling is usually noticed when the person is standing or straining, it may disappear when lying down.

A hernia usually consists of fat, bowel or occasionally fluid. Rarely the bladder, ovary or even the appendix may be part of the hernia. With time many hernias become larger, painful and irreducible - that is they cannot be pushed back in.

Hernias should not be ignored. If left untreated they tend to develop complications and become more difficult to repair.

Complications include bowel obstruction or strangulation. That is the contents such as fat or bowel becomes stuck and the blood supply is cut

Types of Hernias:

- **Inguinal** - in the groin - the most common especially in men - approximately 80 percent. Can be on both sides. 📺
- **Femoral** - relatively more common in women. Lower in the groin. Can be on both sides. 📺
- **Umbilical** - at the navel (belly button). 📺
- **Epigastric** - in the midline between the breast bone and the navel. Can be multiple. 📺
- **Incisional** - at the site of the scar of a previous bowel, gall bladder, gynaecological or other abdominal operation. 📺
- **Recurrent** - at the site of a previous hernia operation.
- **Divarication of the recti muscles** - a midline weakness - surgery not required. 📺
- **Rare** - Spigelian. Lumbar 📺
- **Hiatus hernia** - a different type which occurs within the abdomen.

Hernia surgery:

Most hernias apart from incisional and hiatus can be treated surgically under local anaesthesia together with light sedation.

The aim is a safe operation with a quick recovery and minimal short or long term after effects or recurrence (that is - the hernia coming back).

Most hernias can be treated in a day procedure centre. Thus the cost for non-insured patients is not such a prohibitive factor. It avoids long waiting lists, the patient can have the surgeon and technique of their choice.

'Open method'

A cut is made directly over the hernia. A nonabsorbable permanent mesh is usually used.

The "tension free" technique is preferred. 📺

'Keyhole surgery' - Laparoscopic

This is carried out under general anaesthetic with smaller cuts - a mesh is always used

The team

Mr Maurice Brygel - founder of Melbourne Hernia Clinic - the first hernia clinic in Australia - has performed OVER 9,000 hernia operations. He is the author of *"The Video Book of Surgery"* and *"The Video Book of Hernias"*. In 2005 he produced an hour long television program for

off. This may be life threatening. Emergency treatment is required.

Because hernia surgery is safer now it is usually carried out earlier. Thus the incidence of bowel obstruction and strangulation of hernias has reduced. Increasing age is no longer a bar to surgery. It should be remembered that even babies and adolescents get hernias.

[More About Hernias...](#)

Consulting and operating at:

Bondi Junction

Suite 5, 51 Spring St, Bondi Junction

Kingsgrove Day Surgery Centre

Kingsgrove Road, Kingsgrove

Bankstown Day Surgery Centre

Wickard Road, Bankstown

Sydney Private Hospital

Ashfield

Click below to email Mr Maurice Brygel
info@hernia.net.au

Information or bookings **1300 HERNIA (1300 437 642)**

[Disclaimer - click to view](#)

patient information on hernias shown on Channel 31.
Some photos of teaching in Fiji - 2004 

Other members of the team

Dr. Adam Rapaport is a General Surgeon who graduated from the Sydney University and trained at St Georges Hospital, Kogarah.

He obtained a Fellowship of the Royal Australian College of Surgeons in 1978 and then did 3 years of academic study in America.

He has a special interest in laparoscopic surgery and in particularly laparoscopic hernia repair in which he has extensive experience. He is also experienced in Local Anaesthetic infiltration.

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