

INGUINAL HERNIA REPAIR

GENERAL INFORMATION

An inguinal hernia is a bulging out of the tissues in the groin area. Some hernias allow structures to pass down into the scrotum. The bulge consists of intestine and/or fatty tissue which has slipped into the hernia sack. A hernia may be reducible, irreducible, obstructed or strangulated.

COMMON SIGNS AND SYMPTOMS

Usually there is a bulge with or without vague aching in the area. Most of the time the bulge can be pushed back or reduces itself when you lie down. When the hernia is complicated the bulge can be very tender.

TREATMENT

The best treatment for a hernia is to repair it by operation. There are different techniques by which a hernia can be repaired. Your doctor will discuss with you the technique he uses. The purpose of an operation is to reduce the hernial contents, to remove the hernial sac and in some manner to strengthen the weakened muscles and tissues.

PRE-OPERATIVE PREPARATION

- Make sure your doctor knows what medicines you take, especially medicines which may affect blood clotting
- Your doctor may decide to investigate or treat associated problems which may affect the success of the operation. This refers mostly to smoking, coughing, difficulty with passing urine and difficulty with passing stools.
- Do not eat or drink anything for six hours before the operation. After admission to hospital you may be required to shower, bath and be shaved. You may be given a sedative before the operation.

OPERATION

The operation may be done under local or general anaesthetic. Your doctor will discuss this with you. The operation usually takes approximately one hour.

POST-OPERATIVE CARE

After the operation you will be observed in a recovery area. You will be monitored. You will then return to the ward. You will be given medicines to control pain. Your doctor will discuss with you whether you may be discharged the same day or whether you will be required to stay in hospital overnight. Arrangements will be made for removal of your stitches and for follow up visits to your doctor.

HOME CARE

Your doctor will discuss with you what you may do after the operation. Strenuous activity should be limited for a few weeks. You may eat as you wish but try and keep to normal bowel habits. Your doctor will discuss when you may return to work.

COMPLICATIONS

1. Complications are not common after an INGUINAL HERNIA REPAIR, but you must be aware of the following possible complications.

2. A bleed or haematoma at the site of an INGUINAL HERNIA REPAIR does sometimes occur. Depending on the extent of this bleed, this does sometimes need a repeat operation to evacuate the haematoma.
3. The wound of an INGUINAL HERNIA REPAIR does occasionally become infected. How that is managed will depend on your doctor. It may necessitate dressings or other active management.
4. Occasionally the nerves supplying the skin around the wound and in the region of the upper thigh and the scrotum are injured. This may lead to temporary or permanent numbness in the area.
5. Injuries to the testes or structures to and from the testes are possible, but very rare. When this occurs, the testis may swell and later shrink.
6. Systemic complications like deep venous thrombosis and pulmonary embolism are rare, but possible after any operation or anaesthetic.
7. The incidence of recurrence of a hernia after a repair varies between 1% and 10%.

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