

Let's Talk About...

Inguinal hernia

An inguinal (ING-gwin-ul) hernia is a hole in the abdominal wall of the groin where part of the intestine bulges through.

What causes an inguinal hernia?

An indirect inguinal hernia can happen when the abdominal wall opening in a developing baby does not seal before birth as it normally does. This opening allows testicles to move into a boy's scrotum or connects a girl's labia to the abdominal wall. When children cough, strain, or have a swollen belly, they can squeeze a part of the intestine through the opening to cause a hernia.

Five out of every 100 babies are born with an indirect inguinal hernia. Children almost never get a hernia from an injury (called a direct inguinal hernia).

Who is at risk for an inguinal hernia?

Inguinal hernias happen more often in boys than girls. Premature babies also have a greater chance of getting inguinal hernias, because their bodies haven't fully developed.



What are the signs of an inguinal hernia?

Signs of an inguinal hernia include:

- A bulge in the groin that goes away when your child lies down
- Pressure, aching, or burning in the groin
- Pain in the groin when exercising or straining muscles (like during bowel movements)

If you think your child has an inguinal hernia, take them to their healthcare provider immediately.

How quickly does an inguinal hernia need to be repaired?

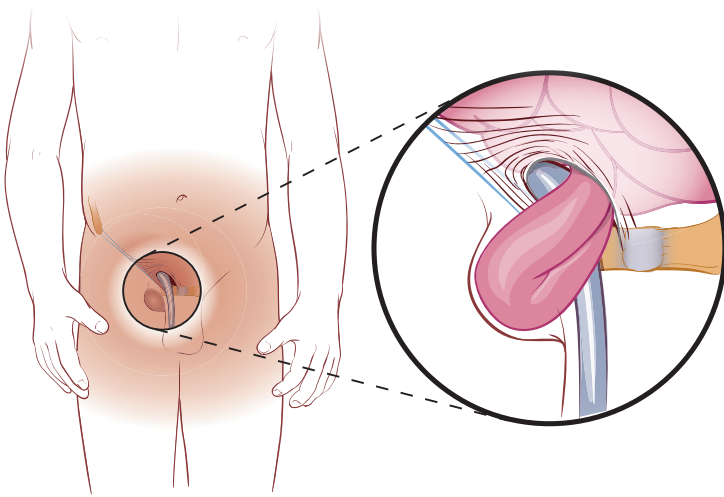
Schedule a time to have your child's hernia repaired as soon as possible if your child is healthy. If part of the intestine becomes trapped outside and can't be easily pushed back into the abdomen, your child has an incarcerated (in-CAR-sir-ay-ted) hernia. This is a surgical emergency.

An incarcerated hernia can cause:

- Bowel blockage (severe constipation)
- A swollen belly
- Vomiting
- Intestinal damage

An incarcerated hernia can happen anytime if your child already has an inguinal hernia. To prevent this, most children, even small babies, should have hernias repaired as soon as possible.

Sometimes only fluid, not part of the intestine, surrounds the testicle or flows through the opening. This is called a hydrocele (HI-drow-seal). A hydrocele usually goes away on its own before your baby is 1 year old. If it lasts longer than a year, it should be repaired. Hydrocele and inguinal hernia repair surgery is essentially the same.



How is an inguinal hernia repaired?

An inguinal hernia is repaired in the operating room. Your child will receive medicine to help them sleep during the surgery.

To repair the hernia, a healthcare provider will:

- Make a small opening in the skin of the groin
- Move the hernia back inside the abdomen
- Close the opening with small stitches under the skin that will later dissolve
- Usually cover the opening with small paper tapes called Steri-Strips™ or surgical glue

After your child wakes up, healthcare providers will move them to the post-anesthesia care unit (PACU) and watch them closely. An older child may be able to go home a few hours after surgery. Premature babies may need to stay overnight.

How can I prepare my child for inguinal hernia surgery?

To prepare for surgery, your child must stop eating and drinking a certain number of hours before it is scheduled. Your child's healthcare provider will give you details when you schedule the surgery.

What can I expect after my child's surgery?

Swelling and scrotum discoloration are common if your child had a large hydrocele or incarcerated hernia. It is also common in infants who had large hernias. The swelling and the discoloration should go away on their own. Blood stains on the Steri-Strips are also common.

How can I care for my child's wound at home?

Your child's healthcare provider will tell you how to care for the surgical site before you take your child home. Always wash your hands before touching or cleaning the wound.

What can my child eat after surgery?

Older children sometimes feel nauseated at home after inguinal hernia surgery. At first, your child may only want liquids instead of solid foods. There aren't any dietary limits once your child is awake and hungry.

What medicine can my child take?

You can usually give your child acetaminophen (Tylenol®) or ibuprofen (Motrin®) to relieve pain. Read the label carefully to give your child the right dose. Your child's doctor may prescribe a stronger pain medicine if needed.

When can my child take a bath or shower?

Your child can have a sponge bath or take a shower 2 days after surgery. Pat the paper tapes dry after your child showers. Do not bathe your child for 7 days after surgery, unless their healthcare provider says otherwise. Soaking in the bathtub can separate the paper tapes and break the wound open.

What activities should my child avoid after surgery?

Older children should avoid contact sports, heavy lifting, and strenuous activity for at least 2 weeks after surgery. Talk to your child's surgeon about activities your child can participate in.

When should I schedule a follow-up appointment for my child?

Schedule a follow-up appointment with your child's surgeon for a few weeks after the surgery before leaving the hospital. If a follow-up visit isn't possible, call the surgeon's office 2 weeks after surgery.

When should I call my child's healthcare provider?

Call your child's healthcare provider if you notice:

- A fever higher than 101°F that doesn't come down with Tylenol® (mild fevers are common after surgery)
- Blood-soaked Steri-Strips or an increased amount of blood from the wound site
- Bleeding into the scrotum
- The scrotum abnormally swelling, changing color, becoming firm, or looking different than when your child left the hospital



- Redness, pus, swelling, or persistent pain in the wound

Call 911 or take your child to the emergency room immediately if they are having trouble breathing.

Notes

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