Abdominal Hernia

HERNIA DEVELOPS WHEN A WEAKNESS THAT FORMS IN THE ABDOMINAL wall enables part of the intestine (bowel) or another organ to protrude through it. Among the most common are umbilical hernias that occur at the navel and inguinal hernias that are seen in the groin area. There are 2 types of inguinal hernia, indirect and direct, that may look similar but have different locations of the protruding intestine. Incisional hernias occur where an incision has been made in the abdominal wall for an operation.

SYMPTOMS

The first symptom of a hernia is usually a small bulging under the skin that is generally painless but may produce discomfort and get larger during strenuous activities or coughing. At this stage, the hernia is **reducible** because its contents (bowel) can be pushed back into the abdomen. However, if the hernia grows, it may become **incarcerated** (unable to be pushed back). If blood stops flowing through an incarcerated bowel, this results in **strangulation**, which is accompanied by pain, often with nausea, vomiting, or constipation.

RISK FACTORS

- · Family history of hernia
- Being male
- Obesity
- Pregnancy

COMPLICATIONS

A hernia may result in entrapment of other organs (such as the bladder or colon) or nerves, producing constipation or problems with urination or sexual function. A strangulated hernia is a surgical emergency because part of the bowel may become **necrotic** (dead), resulting in life-threatening **peritonitis** (inflammation of the abdominal cavity) needing surgical removal of part of the bowel. If you have a hernia and significant abdominal pain, pain over the hernia, or nausea or vomiting, you should seek medical care immediately.

TREATMENT

Initial treatment of a minor hernia includes avoiding heavy lifting and strenuous exercises and, sometimes, wearing a support (truss or girdle). It used to be thought that all hernias should be repaired. However, recent evidence suggests that repair should be performed only if significant discomfort or pain is associated with the hernia. The operation to repair a hernia is called a **herniorrhaphy** (closing the gap in muscles). When the gap is large, a plastic mesh may be used for reinforcement of muscles of the abdominal wall. Use of mesh reduces the risk of the hernia recurring, but the mesh material can become infected. In some cases, hernia repairs may be performed **laparoscopically** (through small skin incisions using a fiberoptic tube with a camera and small instruments), although this approach has not been shown to be better than traditional open operations.

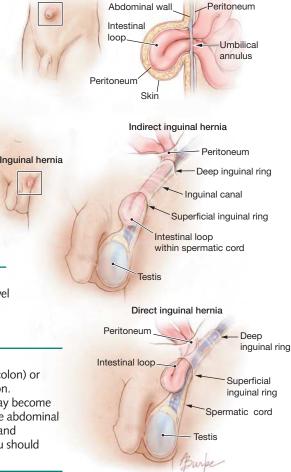
Sources: National Library of Medicine at the National Institutes of Health

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Weight lifting, coughing, straining during bowel movement
Cystic fibrosis and chronic lung infections

- Previous abdominal surgery
- Previous abdominal surgery

Common abdominal hernias Umbilical hernia



FOR MORE INFORMATION

National Library of Medicine http://www.nlm.nih.gov /medlineplus/ency/article /000960.htm

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