

In the Name of God

Bahrami children Hospital



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Abdominal Wall Hernias

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Types of Abdominal Wall Hernias

Epigastric Hernia

An epigastric hernia occurs when a weakened area in the abdominal wall allows a bit of fat to push through. Epigastric hernias are typically small. They occur in the middle of the belly, in the area between the belly button and the breastbone.

Some patients develop more than one epigastric hernia at a time. These hernias typically don't cause symptoms, but you may experience pain in your upper belly.

Treatment of epigastric hernias typically involves surgery, but your doctor will discuss all your options with you in detail.

Incisional Hernia

A hernia that occurs in the area of a previous surgery is known as an incisional hernia. These hernias may occur when the abdominal wall has been weakened by surgery, or when a surgical incision becomes infected, further weakening the area.

Incisional hernias are relatively common because surgical incisions weaken the abdominal area. That weakness makes it easier for a part of the intestine or other tissue to protrude.

Incisional hernias can develop soon after surgery, or they can develop slowly, over months or even years. They typically occur alongside vertical incisions. Incisional hernias tend to be large and rather painful.

Incisional hernias will not heal on their own. Talk to your doctor for more details about your treatment options.

Spigelian Hernia

Spigelian hernias occur throughout the spigelian fascia. Unlike other types of hernias, which develop immediately below layers of fat, spigelian hernias occur in the midst of abdominal muscles. This means that spigelian hernias may not be immediately visible as a bulge or lump. They can go undetected for longer periods of time.

Because spigelian hernias tend to be small, the risk of developing a strangulated hernia is higher.

Spigelian hernias tend to occur more rarely than other types of hernias.

Umbilical Hernia

An umbilical hernia occurs when a weak spot in the belly allows a bit of fat, fluid, or intestine to push through, creating a lump or bulge near the belly button.

Umbilical hernias frequently occur in infants. In most cases, these hernias will heal on their own. Occasionally, however, surgery may be required.

Umbilical hernias also occur in adults, particularly those with health issues that cause increased pressure in the belly. Those issues may include obesity, pregnancy, chronic coughing or constipation, and difficulty urinating.

Because they tend to grow bigger over time, umbilical hernias require treatment. Treatment typically involves surgery, but your doctor will discuss all your options with you in detail. Without treatment, you are at risk of developing a strangulated hernia, which means that blood supply to the tissue has been cut off. **Strangulation is life threatening and requires emergency surgery.**

Symptoms

Abdominal wall hernias are generally visible: they will look like a lump or bulge beneath the skin. These hernias don't usually cause any other symptoms except for mild pain or discomfort, usually when you are straining (for instance, lifting something heavy).

If the hernia becomes strangulated, however, you may experience more serious symptoms, such as severe pain, nausea, vomiting, and/or redness in the area of the hernia. Contact your doctor immediately if you begin to experience these symptoms. A strangulated hernia is life-threatening.

Causes

Abdominal wall hernias can occur in people of any age, including infants. However, the risk of developing a hernia tends to increase as you age. Most abdominal wall hernias are caused by an area of weakness in the abdominal walls. A number of different factors can contribute to the development of that weakness. These factors include:

- Aging
- Chronic coughing
- Collagen vascular disease
- Frequent heavy lifting
- Genetic defects
- History of previous hernias
- Infection (especially following surgery)
- Injuries to the abdominal area
- Obesity

- Pregnancy
- Straining during bowel movements or urination
- Surgical openings

Diagnosis

In most cases, your doctor will be able to determine whether you are in fact suffering from a hernia simply by looking and by gently palpating the affected area.

If for some reason a diagnosis isn't immediately apparent, your doctor may decide to order an imaging test, such as an abdominal ultrasound, CT scan, or MRI. These imaging tests can help to show the hole in the muscle wall, along with the tissue protruding from it.

Treatment

Abdominal wall hernias that have no associated symptoms may not require any treatment at all. Your doctor will discuss your options with you which may include surgery or watchful waiting.

Larger hernias, however, or hernias that are causing pain, may require surgical repair to relieve pain as well as to prevent complications.

There are two types of surgical hernia repair: open and minimally invasive surgery. The type of surgery chosen will depend on the severity and type of hernia you've developed, the anticipated recovery time, your past medical and surgical history, and your surgeon's expertise.

Open Surgery: During this procedure, your surgeon will make a small incision into your groin, and then push the protruding tissue back into your abdomen. Your surgeon will then sew up the weakened area. In some cases, your surgeon will use a mesh to reinforce that weakened area.

Open surgery can be performed either with general anesthesia or with sedation or local anesthesia.

After your surgery, it might be several weeks before you're able to fully resume your normal activities. However, it's still important that you begin moving about again as soon as possible for a healthier recovery.

Minimally Invasive Surgery: Minimally invasive surgery is typically performed under general anesthesia.

During this procedure, your surgeon will make a few small incisions in your abdomen. Your surgeon will then inflate your abdomen, using a special gas, in order to make your internal organs easier to see.

Your surgeon will then insert a small, narrow tube into one of the incisions in your abdomen. This tube has a tiny camera, or laparoscope, at the end of it. That camera serves as a kind of guide for your surgeon, who is then able to insert surgical instruments through the other incisions in your abdomen. Your surgeon will repair the hernia using and may use mesh.

Patients who are candidates for minimally invasive surgery may experience less scarring and discomfort following surgery than those who undergo open surgery. Patients may also be able to return more quickly to their normal activities.

Your doctors will speak with you in detail about all of your treatment options and will recommend a course of action best suited to your individual needs.

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