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inguinal hernia

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What is an inguinal hernia?

An inguinal hernia occurs in the abdomen near the groin area. They develop when fatty or intestinal tissues push through a weakness in the abdominal wall near the right or left inguinal canal. Each inguinal canal resides at the base of the abdomen.

Both men and woman have inguinal canals. In men, the testes usually descend through their canal by around a few weeks before birth. In women, each canal is the location of passage for the round ligament of the uterus. If you have a hernia in or near this passageway, it results in a protruding bulge. It may be painful during movement.

Many people don't seek treatment for this type of hernia because it may be small or not cause any symptoms. Prompt medical treatment can help prevent further protrusion and discomfort.

Symptoms of inguinal hernia

Inguinal hernias are most noticeable by their appearance. They cause bulges along the pubic or groin area that can appear to increase in size when you stand up or cough. This type of hernia may be painful or sensitive to the touch.

Other symptoms may include:

- pain when coughing, exercising, or bending over

- burning sensations
- sharp pain
- a heavy or full sensation in the groin
- swelling of the scrotum in men

Causes and risk factors of inguinal hernia

There isn't one cause for this type of hernia. However, weak spots within the abdominal and groin muscles are thought to be a major contributor. Extra pressure on this area of the body can eventually cause a hernia.

Some risk factors can increase your chances of this condition. These include:

- heredity
- having a prior inguinal hernia
- being male
- premature birth
- being overweight or obese
- pregnancy
- cystic fibrosis
- chronic cough
- chronic constipation

Types of inguinal hernias

Inguinal hernias can be indirect or direct, incarcerated, or strangulated.

Indirect inguinal hernia

An indirect inguinal hernia is the most common type. It often occurs in premature births, before the inguinal canal becomes closed off. However,

this type of hernia can occur at any time during your life. This condition is most common in males.

Direct inguinal hernia

A direct inguinal hernia most often occurs in adults as they age. The popular belief is that weakening muscles during adulthood lead to a direct inguinal hernia. According to the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), this type of hernia is much more prevalent in men.

Incarcerated inguinal hernia

An incarcerated inguinal hernia happens when tissue becomes stuck in the groin and isn't reducible. This means it can't be pushed back into place.

Strangulated inguinal hernia

Strangulated inguinal hernias are a more serious medical condition. This is when intestine in an incarcerated hernia has its blood flow cut off.

Strangulated hernias are life-threatening and require emergency medical care.

Diagnosing an inguinal hernia

Your doctor can usually diagnose an inguinal hernia during a physical exam. During the exam, your doctor will ask you to cough while standing so they can check the hernia when it's most noticeable.

When it's reducible, you or your doctor should be able to easily push an inguinal hernia back into your abdomen when you're lying down on your back. However, if this is unsuccessful, you may have an incarcerated or strangulated inguinal hernia.

Treating inguinal hernias

Surgery is the primary treatment for inguinal hernias. It's a very common operation and a highly successful procedure when done by a well-trained surgeon.

Options include either an open inguinal herniorrhaphy or laparoscopic inguinal herniorrhaphy. In open inguinal herniorrhaphy, one larger incision is made over the abdomen near the groin. In laparoscopic inguinal herniorrhaphy, multiple smaller abdominal incisions are made. A long, thin tube with a lighted camera on the end helps the surgeon see inside your body to perform the surgery.

The goal of either surgical approach is returning the internal abdominal tissue(s) back into the abdominal cavity and repairing the abdominal wall defect. Mesh is commonly placed to reinforce the abdominal wall. Once structures are put into their proper place, your surgeon will close the opening with sutures, staples, or adhesive glue.

There are potential pros and cons to open inguinal hernia repair versus laparoscopic. For instance, laparoscopic herniorrhaphy may be preferable if you want a shorter recovery time. But your risk of hernia recurrence may be greater with laparoscopic repair.

Prevention and outlook of inguinal hernias

Although you can't prevent genetic risk factors, it's possible to reduce your risk of occurrence or the severity of abdominal hernias. Follow these tips:

- Maintain a healthy weight.
- Eat a high-fiber diet.
- Quit smoking cigarettes.
- Avoid heavy lifting.

Early surgical treatment can help cure inguinal hernias. However, there's always the slight risk of recurrence and complications. These can include

infection after surgery or poor surgical wound healing. Call your doctor if you experience new symptoms or if side effects occur after treatment.

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