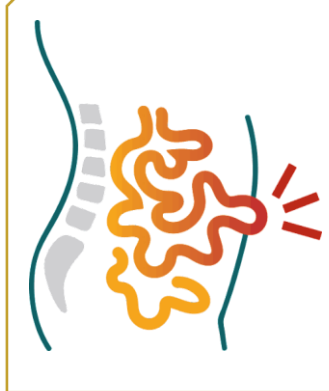




جامعة الإمام عبد الرحمن بن فيصل
IMAM ABDULRAHMAN BIN FAISAL UNIVERSITY

مستشفى الملك فهد الجامعي
King Fahad Hospital The University

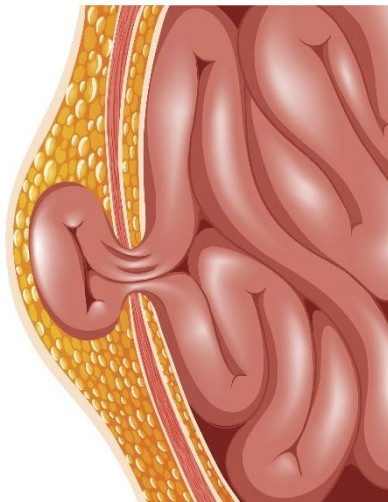
What do you know about Hernias?



What do you know about Hernias?

Hernia is the emergence of viscera or part of it from an unusual orifice in the wall of the cavity that contains it. External abdominal hernia is the most common type of hernia, most of which are the inguinal, femoral, and umbilical hernia.

It could affect any age of both genders, and it is more common in men than women.





What are the Causes?

Any increase in intra-abdominal pressure is susceptible to be followed by a hernia, as below:

- Lifting heavy weights.
- Chronic cough and whooping cough may be a cause of hernia in childhood.
- Chronic lung diseases resulting from smoking.
- Straining when urinating, as in an enlarged prostate or constipation, precipitate the occurrence of hernias in adults.
- Fluid accumulation in the abdominal cavity because of liver, kidney, and heart diseases.
- Weakness of the abdominal muscles because of obesity.
- Weakness of the abdominal muscles due to repeated pregnancy.

What are the Symptoms?



- A new mass in the thigh joint or abdominal wall increases in size while standing, walking, or coughing.
- The hernia increases in size with coughing, and it is easy to spot its site. In most cases the hernia contents can be returned internally.

What are hernia types?

1. Inguinal hernia:

It shapes 75% of hernia types. It affects men 25 times more than women. It is divided into two sub-types:

- **Indirect inguinal hernia:** The hernia is in the way of the testicles during the process of development. It descends from the abdominal cavity to the testicle vessel (scrotum) when it is completed.
- **Direct inguinal hernia:** It is defect in the muscle of the posterior wall of the inguinal canal.

2. Femoral hernia:

Where it passes into the femoral canal, and since this canal is wider in females than in males, the hernia often occurs in middle-aged women. The expansion of the female pelvis is due to the small size of the muscles below the inguinal ligament, which leaves a wider distance for the femoral canal.

What are hernia types?

3. Incisional hernia

It occurs in a scar of a previous surgical incision in the abdomen. It is common in the middle of the abdomen above and below the navel, or it is often a complication of suppuration of wounds, or increased pressure inside the abdomen during the recovery period.

4. Epigastric hernia:

This hernia occurs in the epigastric area because of a weak or deficient white line from which a small fat lump protrudes and pulls a portion of the peritoneum behind it.

5. Hiatal hernia

It is an orifice in the diaphragm occurs due to an accident and in cases of neonates.

What is hernia in infants and children?



1. Inguinal hernia:

Most of these hernias result from a continuous connection between the abdominal cavity and the inguinal canal towards the scrotum in males and labium in females.

What are symptoms in infants and children?

- The hernia is seen when the child cries, while it is apparently normal during the infant's sleep, rest, or relaxation.
- The hernia appears suddenly in an infant with discomfort, or it may be with vomiting, flatulence and other signs direct the doctor towards intestinal obstruction. For older children, the hernia is visible just when they stand up.

What is hernia in infants and children?

2. Umbilical hernia:



One of the most common types. It is noticed at birth. It is a protrusion in the navel caused by a weakness in the wall of the abdominal cavity. In normal cases it closes before birth.

What is Hernia therapy?



In general, all types of hernia require surgical intervention, and each type has its special surgery to be explained by the surgeon to the patient, not only when complications occur, but the umbilical hernia in newborns can wait up to 4 years old.

And surgery is either via:

- 1- The traditional surgical method, or
- 2- Laparoscopic hernia repair for adults.

What are hernia complications?



1. Recurrent hernia or retrograde hernia:

A failure of the hernia to return to the abdominal cavity on its own or by pressing on it with local pain, and it can appear for a long time without pain.

2. **Obstructed hernia:** leads to intestinal obstruction, the presence of constant pain with bloating and other symptoms such as nausea, vomiting, and constipation, and the affected person becomes ill and weak with high temperature requires urgent surgical intervention.

3. **Strangulated hernia:** it is considered a late stage of obstructed hernia where part of the intestine dies, and it requires urgent surgery, too.



Follow-up:

- To reduce the risk of the hernia turning into an obstructed, it must be treated and repaired as soon as possible.
- Follow up treatment by attending the specific appointments.
- Changing the lifestyle according to the patient's status.

What are surgery complications?



7% of people who undergo hernia removal face complications, including:

- Recurrence of the hernia.
- Wound contamination.
- Fluid collection in the scrotum (the bowl of the testicles)
- Swelling and bruising of the scrotum.
- Testicular atrophy on the affected side, but it is rare.



What are the prevention methods?



- Do not to carry heavy objects.
- Follow a balanced diet to lose weight.
- Avoid constipation by eating vegetables and drinking lots of fluids.
- Changing the lifestyle by eating healthy food and doing exercises.

Consult a doctor when there is a chronic cough

What are post-operative instructions?



- You can take a shower three days after the operation, without submerging the body with water until the stitches are removed.
- In the presence of fever, redness, red streaks, heat, or increased pain at the site of the operation wound, or the presence of drainage from the wound, you should contact your doctor or go to the emergency room.
- Take a sufficient period of rest every day until you are fully recovered.
- Avoid carrying heavy weights, including babies, for a period of three months.
- Avoid strenuous sport exercises and activates at home until you are re-examined by a doctor in the clinic.
- For women, it is advised not to become pregnant for at least six months after the surgery.

What are post-operative instructions?



- Avoid constipation and stress by drinking plenty of fluids and eating balanced nutritional diet such as meat, chicken, vegetables, and fruits.
- Do not take any medicines other than those prescribed by your doctor.
- Avoid smoking after the surgical operations because it delays wounds healing of.



It is necessary to keep coming to the clinic at the appointment dates and the dates for removing the operation stitches to ensure that your condition improves after discharge from the hospital and that you are free from any complications.

Sources and references:

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:The illustrations have been used by

Flaticon.com

Review and audit:

The content of this booklet has been reviewed by consultants from the
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