



Inguinal hernia

What is it?

A hernia is a lump created by tissue pushing through a weakness or opening in the abdominal wall. Inguinal hernias occur in the groin region.

Background

In boys, the testes initially develop in the abdomen. In the seventh month of pregnancy, the testes pass through the abdominal wall via the inguinal canal to the scrotum. The path through the inguinal canal usually closes before, or shortly after birth. When the passage doesn't close there is a remaining connection between the abdomen and groin. If any tissue pushes through into this opening, it forms an inguinal hernia.

Girls have a similar but smaller passage. Inguinal hernias are much less common in girls

Who gets it?

Inguinal hernias occur in up to 5 in 100 babies.

It is more common in boys and in premature babies.

How does it present?

How is it diagnosed?

An inguinal hernia causes a swelling in the groin or the scrotum. The swelling may get bigger when your child is crying or coughing. It may go away when your child is asleep or resting quietly.

If a loop of bowel or other tissue becomes trapped in the hernia, its blood supply can be blocked. This will be painful, and the area may become discoloured. Your child may vomit.

The doctors will usually be able to make the diagnosis by your description of the lump, and by their examination of your child. Sometimes they may press on your child's abdomen to help and make the lump appear.

What tests are performed?

No investigations are usually required for the child with an inguinal hernia.

What are the treatment options?

The treatment for all inguinal hernias is surgical.

There is a risk that the inguinal hernia may become irreducible and affect the blood supply to either the hernia contents or to the testes. The surgery is usually elective, however if the hernia becomes discoloured or painful, emergency surgery may be necessary. If the hernia becomes painful or discoloured, take your child to the doctor immediately.

A small incision is made in the skin crease at the groin. The hernia is reduced. The hernia sac is opened and tied off. The wound is closed with dissolving stitches and a dressing is placed.

(See also "inguinal herniotomy" sheets)

What are the complications of surgery?

Bleeding and infection may occur after inguinal hernia surgery, as for any operation.

There is a very small risk of damage to the blood vessels to the testis and to the vas (in boys).

What are the outcomes?

Inguinal hernia surgery is very successful. There is a small chance of recurrence of the inguinal hernia.

There is a risk to the growth of the testis if the blood flow is impaired. This may occur as a result of surgery, or if the hernia has become incarcerated.

What is the follow-up?

Your child will need review of their wound and their testes size. An outpatient appointment will be arranged 4-6 weeks after surgery.