

# UNDERSTANDING HERNIA



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## Do You Have a Hernia?

People with a hernia often suffer in silence. They hurt but are reluctant to seek a medical consultation for several reasons. They may not want to take the time out of their busy schedules to get checked. They may be concerned about missing work for hernia surgery or recuperation. Or they may think their hernia will take care of itself.

The good news is that in many cases, hernias can be treated quickly and easily. Recently developed surgical techniques, such as minimally invasive laparoscopic surgery, have resulted in quicker procedures with shorter recuperation times. Today, most hernia patients are back on track faster than ever before.

Ignoring a hernia won't make it go away on its own. In fact, when left untreated, a hernia can worsen, which may lead to serious complications that require more extensive surgery, more time in the hospital and longer recuperation.

If you think you may have a hernia, don't wait any longer. Call your doctor for an appointment. Or come to one of our UConn Health free hernia screening events, where you can meet with a doc-



tor who can assess your symptoms and advise you on possible treatment options. Monthly screenings take place at three locations: Farmington, Canton and Southington.

## Signs and Symptoms

Your doctor may suspect you have a hernia if you have one or more of the following signs or symptoms:

- A bulge on one or both sides of your groin (the bulge may appear to go away while you're lying down)
- Pain in the groin area, particularly while you exercise, lift, strain, have a bowel movement or cough (the pain or discomfort usually goes away when you rest)
- Sharp abdominal pain
- Discomfort in the groin area, such as itching, aching, burning, heaviness or weakness
- Swelling or pain in the scrotum

- Difficulty urinating or having bowel movements
- Heartburn
- Problems swallowing
- Unexplained nausea or vomiting
- Burning or pain in your throat or esophagus
- Chest pain
- Abdominal bloating, belching, pain or discomfort
- Pain or pressure around a surgical incision site



## What Is a Hernia?

A hernia is a very common health condition that occurs when internal tissue or part of an organ bulges through a weak muscle into a place where it doesn't belong. There are several types of hernias:

#### Groin (inguinal) Hernia

The most common type of hernia, the inguinal hernia occurs when a structure in your abdomen typically part of your small intestine or fatty tissue — bulges through your abdominal wall and into your inner groin. Inguinal hernias most often occur in men.

#### Upper Thigh (femoral) Hernia

More common in women than men, a femoral hernia occurs when fatty tissue or part of the intestine bulges through into your outer groin.

## **Risk Factors**

Usually, your abdominal muscles hold your intestines in place. But if you have a weak spot in your abdominal muscles, your intestines or other abdominal tissue may bulge out and form a hernia.

Most hernias result from pressure on a weak abdominal muscle. This weakness may be due to a problem you were born with or something that has occurred over time. A frequent cause of pressure is heavy lifting (e.g. by construction workers or weightlifters).

Factors that may contribute to the development of a hernia include:

- A family history of hernias
- Chronic constipation
- Chronic cough (common in smokers)
- Heavy lifting
- Obesity
- Pregnancy
- Smoking
- Straining to urinate as the result of having an enlarged prostate, which can interfere with urination

#### Hiatal Hernia

This happens when the upper part of your stomach bulges into your chest through a small opening in your diaphragm (the muscle separating your abdomen from your chest). Having a hiatal hernia can allow stomach acid to back up into your esophagus, which can cause heartburn and gastroesophageal reflux disease (GERD).

#### Navel (umbilical) Hernia

This condition occurs when abdominal tissue or part of the intestine pushes through into the area around your navel. Although it's most common in infants, it can also happen in adults.

#### Abdominal (ventral) Hernia

This type of hernia can develop throughout the abdomen, such as the site of a surgical incision from a cesarean section or an appendectomy.



#### **By The Numbers**

- About 25% of males and about 2% of females will develop an inguinal hernia in their lifetime. <sup>1</sup>
- More than 1 million hernia repair surgeries are done in the U.S. each year. Of those, 800,000 are to repair inguinal hernias; the rest are for other types of hernias.<sup>2</sup>
- Anyone can develop a hernia, including babies and children. However, they're most likely to occur in men over age 40. <sup>3</sup>
- Indirect hernias are twice as common as direct ones; femoral hernias account for only 5% of all inguinal hernias. Inguinal hernias are more often on the right side than the left. <sup>4</sup>



# Diagnosis

Doctors diagnose hernias by you about your symptoms, talking with you about your medical history and performing a physical examination. You may be asked to stand up and cough while your doctor feels for a bulge caused by the hernia.

Your doctor may also recommend one or more of the following tests:

- X-rays, including a chest X-ray or an abdominal X-ray: X-rays use small amounts of radiation to create images of internal organs and structures.
- **Computerized tomography (CT) scan:** These scans use a combination of X-rays and computer technology to create images. They sometimes include a special dye that you drink, or that is injected into a vein, to show additional details.

- **Abdominal ultrasound:** This test uses sound waves to create images of your abdominal area on a computer screen.
- **Upper endoscopy:** During this exam, your doctor passes a thin scope with a tiny camera into your esophagus to visually inspect the upper part of your digestive tract.
- **Barium swallow:** During this test, you swallow a compound known as barium sulfate, which allows abnormalities in the upper digestive tract to appear on X-rays.
- **Esophageal manometry:** This is an exam in which a thin tube is passed through your nose and esophagus and into your stomach to check the strength of muscles lining the upper digestive tract.

## Treatment

If you have a hernia, your doctor may recommend lifestyle changes, such as quitting smoking, avoiding heavy lifting or losing weight. However, if symptoms persist or your hernia requires repair, your doctor may recommend surgery.

Here at UConn Health, we repair hernias using the following surgical procedures:

**Open repair:** Your surgeon performs hernia repair via a larger incision in your abdomen. The repair is made either with a surgical mesh (a strong meshlike material) or sutures (stitches). Open repair may be necessary when hernias are infected or are causing potentially serious complications.

**Laparoscopic surgery:** Your surgeon inserts surgical tools into your abdomen via several very small incisions, and repairs your hernia using sutures or surgical mesh. Because it's minimally invasive, laparoscopic surgery results in less pain and faster recovery than open repair.

**Robot-assisted laparoscopic surgery:** This is a minimally invasive procedure in which your surgeon operates with the assistance of a robotic system.



The robotic system uses a thin tube with a tiny camera and light that allows your surgeon to operate with extra precision. Robot-assisted surgery reduces pain, bleeding, and scarring while speeding up recuperation time.

**Surgical mesh:** Surgeons often use a synthetic material known as surgical mesh to repair hernias. Surgical mesh helps strengthen hernia closures by providing support to weak tissue. It's used in all types of hernia surgery and does not require removal from the body.



## Why Choose UConn Health for Hernia Repair?

If your hernia requires surgery, the specialists at UConn Health can usually repair the problem by conducting minimally invasive laparoscopic (traditional or robotic-assisted) surgery on an outpatient basis.

### Meet Our Team

Our board-certified surgeons have experience treating all types of hernias, including inguinal, femoral, hiatal, umbilical and ventral hernias. And if you have a more complex hernia, you can rest assured knowing our surgeons are skilled at performing other surgeries that require abdominal wall reconstruction.



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To learn more about hernia repair at UConn Health, call 860-679-2599 or visit h.uconn.edu/hernia

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