

Abdominal hernias

Overview

Around 1 in every 20 Australians will suffer from an abdominal hernia at some point in their lives. It is responsible for some 40,000 operations across the nation every year. A hernia occurs when part of the intestines, or fatty tissue protrudes through a torn or weakened part of the abdominal wall. Usually a visible lump can be seen or felt and it may be painful or cause digestive problems and a heavy, uncomfortable feeling in the abdominal area.

There are several different types of abdominal hernia that are categorised depending on where they occur — which can be in the groin area, the belly button region or elsewhere.

Surgery is usually required to repair all types of abdominal wall hernia.

In many cases a hernia may present no serious problems, but in some instances they can require immediate medical treatment, for example if they are causing a bowel obstruction or if the blood supply is reduced or cut off (a strangulated hernia). If this is the case, seek immediate medical assistance.

Cause

A hernia is caused when part of the intestines or other tissues push through the abdominal wall because of a weakness in the muscle that holds it in place. Because the abdominal wall is made up of many different layers, it can be hard to predict which areas will be more susceptible to weakness, and therefore a hernia. But statistics show the four most common are:

- **Inguinal hernia.** This is the most common type. It involves protrusion of abdominal contents into the groin. These account for about two-thirds of all hernias. Men in particular are at risk from this type of hernia — it is believed that as many as 1 in 4 men will develop an inguinal hernia at some point in their lives.
- **Umbilical hernia.** This involves part of the gut pushing through weakened area near the navel (belly button). This type of hernia is most common in infants, women who are obese or overweight, and women who have had a number of pregnancies.
- **Femoral hernia.** This involves the area at the top of the thigh where the leg joins the upper body. This hernia occurs in a similar way to the inguinal hernia, and causes tissue or parts of the bowel to push through a weak muscle area. These types of hernia are also more common in women.
- **Incisional hernia.** These occur after abdominal surgery. Any cut made to the abdominal wall can create a structural weakness, even though it has been surgically repaired. Sometimes, intestines will find their way through this weakened area to create an incisional hernia.

An uncommon but potentially life-threatening complication of a hernia is the **strangulated hernia**. In this instance blood supply has been reduced or cut off. This means the tissue contained can die. Initially nausea and vomiting can result if it involves the bowel. It is a medical emergency and needs urgent attention as it can be fatal if left untreated.

There are a number of factors that can contribute to the development of a hernia, and these include:

- Family history. There is a known hereditary link, meaning that the condition can run in families.
- Obesity. Excess weight places pressure on the abdomen.
- Pregnancy.
- Congenital birth defects — a weakness in the abdominal wall that the person was born with.

Symptoms

Many people don't even know they have a hernia and they may not have any symptoms at all. However, some people have a range of persistent and sometimes severe symptoms that will vary according to the size and location. Common symptoms include:

- A highly visible lump that can be seen from the outside. The size of the lump will depend on the area of abdominal wall affected. Sometimes this lump will disappear when the person is lying down.
- A heavy, uncomfortable or dull sensation at the hernia site. This can be exacerbated by lifting or bending over.
- Aches and pains at the hernia site, particularly when stretching, lifting or carrying heavy objects.

In cases of strangulated hernia — a very serious condition where blood supply to the area has been constricted — immediate medical attention is required.

Symptoms include:

- Nausea.
- Vomiting.
- Severe pain.
- Severed tenderness over the hernia
- Distension of the abdomen

Diagnosis

To diagnose a hernia, your doctor will ask for detailed information about symptoms and conduct a physical examination to feel for the lump created by the hernia. You may be asked to cough or bend as this may increase the size of the hernia and cause it to bulge through the skin.

Treatment

The only type of hernia that goes away by itself is umbilical hernia during pregnancy. Surgery is the only way to repair a hernia, although the timing of this may depend on the size of the hernia, severity of symptoms and risk of

strangulated hernia.

Surgery is generally done in one of two ways, through an incision in the abdomen, or through laparoscopic (also known as keyhole) surgery.

The procedure involves the use of stitches and specially-made surgical mesh to repair the hole in the abdominal wall and prevent a new hernia.

Any organ or tissue that has pushed out of the abdominal wall is pushed back into the abdomen before placement of the mesh.

Support and resources

- MD Consult
- Australian Doctor

Note: Abdominal hernias are not the only types of hernia. eg. spinal disc hernia.

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