

What is a hernia?

A hernia is a gap or weakness in the muscles of the abdomen. Part of the bowel or other tissues nearby may push through the weak area. This causes a bump or bulge under the skin, called a hernia.

There are different types of hernias, depending on where they occur.

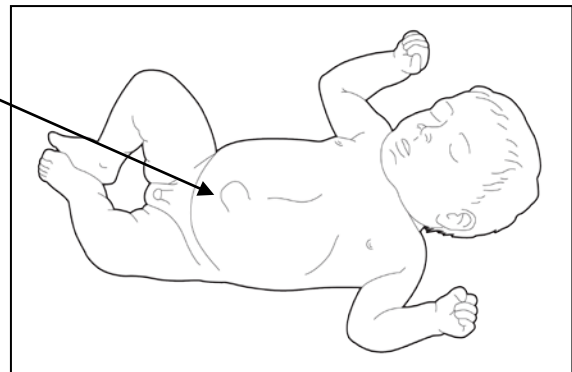
Location of hernia	Type of hernia
In the groin. This is the most common type.	Inguinal hernia
At the belly button.	Umbilical hernia
At the scar from previous surgery.	Incisional hernia
In the upper thigh. This type of hernia is rare.	Femoral hernia

Umbilical hernias

Most babies are born with a small opening in the abdominal muscle, where the umbilical cord used to be.

A few weeks after birth, a hernia may appear as a bulge at the belly button. It can look big, but usually it never causes any symptoms and goes away without any treatment before the age of 3 years.

Sometimes a small part of the bowel (intestines) can move in and out through this opening. This causes swelling through the belly button that can change in size.



Causes

- There is very little muscle under the belly button, which causes a weak area.
- Increased pressure from sneezing or crying can push part of the bowel or tissue through the belly button.

Signs and symptoms

- Swelling around the belly button that may get bigger with crying, coughing, sneezing or straining.
- Usually the opening in the muscle is only 1 to 2 cm.

Treatment

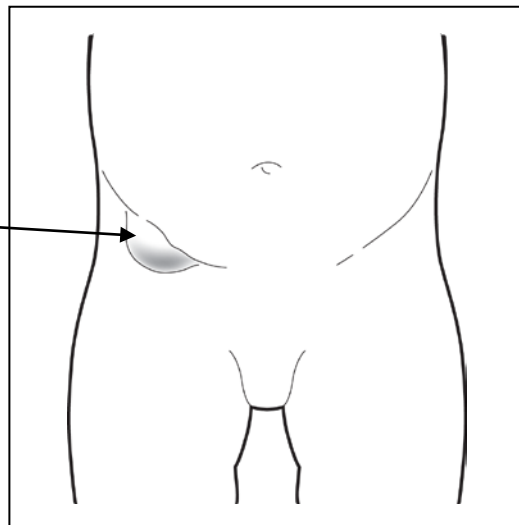
- Most children do not need surgery for an umbilical hernia. Surgery is rarely needed in the first years of life.
- If the swelling is tender, hard and/or your child is vomiting, have your child checked by your doctor.
- Since most go away on their own, an umbilical hernia is usually not repaired until after the age of 3. If surgery is needed, it is a minor operation where the abdominal muscles are stitched up.
- Do not tape a coin over the hernia, as this does not fix the hernia and may cause a serious skin rash.

Inguinal hernias

Inguinal hernias can occur on one or both sides of the groin. The picture shows a hernia on the right side.

Hernias are more common in boys and premature babies.

An inguinal hernia occurs in up to 5 out of 100 babies.



Causes

During a baby's development, there is a natural opening between the abdominal cavity and the scrotum or groin. It is called the inguinal canal.

- In boys, the testicles develop in the abdomen and move down into the scrotum through the inguinal canal.
- Although girls do not have testicles, they do have an inguinal canal, so they can get hernias too.

The abdominal lining normally closes the canal shortly after birth. If the canal does not close completely, sometimes fluid, bowel or other tissues in the abdomen can enter the groin.

Signs and symptoms

- Swelling above the groin or in the scrotum.
- Swelling that may appear later in the day.
- Swelling that may get bigger with crying, coughing, sneezing or straining.
- Pain or discomfort in the hernia area.

Treatment

- If it is just fluid in the canal (called a hydrocele), this may get better and close by itself by 18 months of age.
- If it is bowel in the canal, this is an inguinal hernia. All inguinal hernias need surgery, because the hernia may get bigger if it is not repaired.
- Sometimes the bowel (intestines) can become trapped in a hernia. This may cause the bowel to become blocked. If the blood flow to the area also becomes blocked, the bowel and testicle may be damaged. Signs to look out for are a painful hard lump, discolouration and vomiting. Surgery can fix this. It is usually a same-day operation, but premature babies may need to stay overnight after surgery.

During surgery

- Your child will be given a general anesthetic so that he or she will be asleep during the surgery and not feel any pain.
- If your child is more than 1 year old, one parent will be allowed to go with your child into the operating room until he or she is asleep. Once your child is asleep, you will be asked to go to the waiting room until the surgery is done.
- When the surgery begins, the surgeon make a small cut (incision) near the hernia. The contents of the hernia are put back into the abdomen and the opening or weak spot is closed and strengthened with dissolvable stitches.
- We do not use mesh or the laparoscopic method to fix hernias in children. These techniques are only used in adults.

After surgery

- After surgery, your child will go to the Post Anesthetic Care Unit (PACU). In the PACU, your child will be closely watched until he or she is fully awake. As soon as possible, the nurse will bring you to the PACU to be with your child.
- Children usually go home later the same day, but some may need to stay overnight. When it is safe for your child to go home, the nurses will review how to care for him or her at home. You will also be given printed instructions to take home.

**If you have any questions, please speak with
a member of the health care team.**