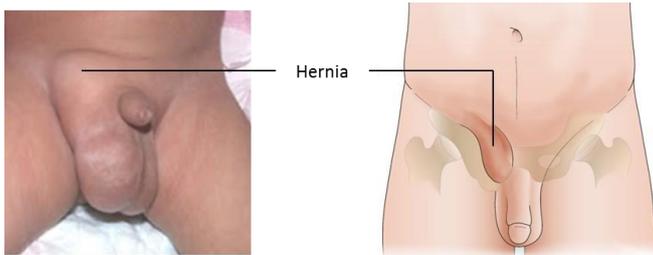


What is an inguinal hernia?

A hernia occurs when a small piece of bowel or intestine pushes through a weakness in the muscles of the abdominal (tummy) wall.

There are different types of hernia. An inguinal hernia is caused by a piece of bowel sliding through a small passage in the abdominal wall called the inguinal canal (the pathway through which the testes drop into the scrotum).

Inguinal hernias are common in premature babies and more so in boys.



Hernia repair

Inguinal hernias do not fix themselves. An operation is needed to close the inguinal canal and stop the bowel slipping through.

Before baby's operation

The Anaesthetist will meet with you and discuss your baby's anaesthetic.

During the operation the surgeon makes a small incision in the skin and closes the weakness in the abdominal wall with stitches.

The operation usually takes about 30 minutes. Your baby will usually be away from NICU for an hour or two. This allows time for baby to be transferred to and from theatre and baby's post anaesthetic recovery.

Post-op care

Baby's wound will be closed with disposable stitches and covered with an adhesive dressing. The dressing will fall off or can be removed about a week after the operation.

Most babies are able to start feeds once they are awake and ready to feed.

Your baby may be a little irritable in the first 24 hours after their surgery. Paracetamol can be given for this in the first 24 hours.

You can bath baby 48 hours after their surgery.

Are there any complications of the operation?

Repair of an inguinal hernia is a common and straightforward operation but any operation has a risk of a complication. Fortunately, these are uncommon.

1. Complications of the anaesthetic. Your anaesthetist is the best person to discuss these with you and can answer your questions.
2. Temporary bruising of the scrotum occurs occasionally.
3. A wound infection is uncommon.
4. Sometimes the baby's scrotum may appear slightly swollen but this usually settles by itself.
5. A recurrent hernia can develop in about 1 in 100 operations and would need further surgery.
6. Damage to normal structures that pass through the inguinal canal to and from the testis (blood vessels and the sperm tube) is rare.
7. In some boys the testis has not fully dropped into the scrotum when the hernia is repaired and an operation may be needed in the future to bring it down.