



Groin (Inguinal) Hernia Repair

What is a groin (inguinal) hernia repair?

Groin hernia repair is surgery to repair weakness in the abdominal wall or groin. The bowel that is pushing through the weak area is pushed back into its normal place.

When is it used?

A groin hernia may need to be repaired with surgery if it is causing symptoms or to avoid complications. For example, after the bowel has pushed through the muscle wall, its contents may become trapped. A dangerous complication is that the blood supply to the bowel may be cut off and the trapped tissue may die, resulting in severe infection.

Two types of surgery may be done:

- open surgery
- laparoscopic surgery.

If your hernia is causing few or no symptoms, you may choose not to have surgery. You may need to use a groin support. Ask your healthcare provider about your choices for treatment.

How do I prepare for a hernia repair?

Plan for your care and recovery after the operation, especially if you are to have general anesthesia. Allow for time to rest. Ask someone to drive you home after surgery and to help you with your day-to-day needs for a day or two.

Follow your healthcare provider's instructions about not smoking before and after the procedure. Smokers heal more slowly after surgery. They are also more likely to have breathing problems during surgery. For this reason, if you are a smoker, you should quit at least 2 weeks before the procedure. It is best to quit 6 to 8 weeks before surgery. Also, your wounds will heal much better if you do not smoke after the surgery.

Follow any other instructions your provider gives you. If you are to have general anesthesia, eat a light meal, such as soup or salad, the night before the procedure. Do not eat or drink anything after midnight and the morning before the procedure. Do not even drink coffee, tea, or water.

Make sure your provider knows about all medicines and herbal remedies you are taking. You may need to stop some medicines for a short time before the procedure.

What happens during the procedure?

For open surgery, you will be given a regional or general anesthetic. A local anesthetic is a drug that should keep you from feeling pain during the operation. A general anesthetic relaxes your muscles, puts you to sleep, and prevents you from feeling pain during the operation.

The surgeon will make a cut in the lower side of your abdomen, push your intestine back into the abdominal cavity, and cover the opening (the defect in the abdominal wall). The surgeon may place a mesh over the weak spot in the abdominal wall, creating a newer, stronger wall.

Open hernia repair has been done for many years. Laparoscopic surgery is a newer procedure that in some cases may be done instead of open surgery. A laparoscope is a thin tube with a light and tiny camera. You will be given a general anesthetic. The surgeon will make a small cut in your abdomen and insert the scope through the cut. Tools to repair the hernia will be inserted through one or more other small cuts.

What happens after the procedure?

You may be able to go home later on the day of the operation. In some cases you may need to stay at the hospital for 1 to 3 days, depending on how well the repair heals.

Do not do anything strenuous for the next 6 to 8 weeks. For example, avoid lifting anything heavy and avoid straining when you cough, if possible.

Ask your healthcare provider how you should take care of yourself right after surgery and over the next couple of weeks. Ask when you should come back for a checkup.

What are the benefits of this procedure?

You no longer have the discomfort of a hernia or the risk of trapped intestine.

What are the risks associated with this procedure?

- There are some risks when you have general anesthesia. Discuss these risks with your healthcare provider.
- A regional anesthetic may not numb the area quite enough and you may feel some minor discomfort. Also, in rare cases, you may have an allergic reaction to the drug used in this type of anesthesia. Regional anesthesia is considered safer than general anesthesia.
- The nerve that runs along the inguinal canal may be damaged. This could make the area from the thigh to the groin numb. In men, a vas deferens may be damaged. This could make a man sterile if the other vas deferens were also hurt.
- In men, if the artery in the canal is damaged, it could stop the testicle from producing semen, and/or it could leave a bruise on the scrotum.
- In men the testicle may swell after the surgery and be uncomfortable.
- A tube may be placed in your bladder if you are unable to pass urine.
- A hernia may recur at or around the area that was repaired.
- If mesh is inserted, it may become infected and need more surgery.
- There is a risk of infection or bleeding.

You should ask your provider how these risks apply to you. Also ask how likely it is that you will have complications if you choose not to have the surgery.

When should I call my healthcare provider?

Call Dr. Crawford's office right away if:

- You develop a fever.
- You cannot urinate.
- Your wound becomes red, tender, or swollen, or it drains fluid.
- You can't control your pain or the pain is getting worse.

Call during office hours if:

- You have questions about the procedure or its result.
- You want to make another appointment.

Published by McKesson Corporation.

This content is reviewed periodically and is subject to change as new health information becomes available. The information is intended to inform and educate and is not a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional.

Developed by McKesson Corporation

Copyright © 2007 McKesson Corporation and/or one of its subsidiaries. All Rights Reserved.