



Associate Professor

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Inguinal Hernia

Inguinal hernia is a condition that occurs when the soft tissue from a part of the intestine or abdominal tissue protrudes out of the abdomen through a tear in the abdominal wall. It is more commonly seen in men than women.

Hernias can be developed during birth, and occur when the abdominal wall fails to close properly. It can also be developed if there is connective tissue degeneration in the abdominal wall causing weakness of muscles due to which pressure builds up in the abdominal wall.

The most commonly observed symptoms of inguinal hernia include groin pain (which worsens with coughing or lifting heavy objects), burning, gurgling sensation, nausea and vomiting.

Some of the other factors that worsen hernias are chronic cough, obesity, constipation, pregnancy, poor nutrition, smoking, and stretching or straining abdominal muscles while lifting heavy objects.

Prof. Apostolou will confirm the hernia on physical examination. Ultrasound can be helpful in evaluating.

Abdominal wall and incisional/ventral hernias

A variety of abdominal wall hernias can occur, commonly around the umbilical (navel) area or related to previous abdominal surgery. These are usually repaired surgically when there are symptoms such as pain or swelling, and to avoid dangerous complications such as intestinal obstruction.

These hernias are often repaired using an open laparoscopic or robotic approach with the use of mesh. The keyhole/robotic repair may assist recovery and reduce post-operative pain. Larger ventral hernias which result from previous surgery may require more major surgery to repair the abdominal wall, usually in an open manner and potentially using biologic mesh which can adjust as the patient heals.

Common complications of abdominal wall hernia repair include accumulation of fluid, called seroma, and bruising. These usually both improve with time and rarely may require re-operation. It is imperative to avoid strenuous activity in the early post op period following these repairs (at least 4 weeks) to minimise recurrence and additional complications.

Treatment

Surgery is the only treatment and is usually performed for hernias that enlarge in size due to increased intra-abdominal pressure, causing intestinal obstruction and restricted blood supply, which may lead to death of bowel tissues.

A hernia repair is usually performed as an outpatient surgery with no overnight stay in the hospital.

The operation may be performed as an “open” or “keyhole” (laparoscopic) surgery. Your surgeon will decide which procedure is suitable for the repair and will perform with your consent.