

# Hernias: Causes and Treatment Options

by Rick Alan

En Español (Spanish Version)



Many men will suffer a hernia condition sometime in their lives. Although relatively easy to repair, a hernia left undiagnosed can become more troublesome than necessary.

## What Is a Hernia?

A hernia occurs when part of fat tissue or internal organ bulges through an abnormal opening (a rupture, tear, or weakness) in the structures normally containing it. Most often, this "bulge" is caused by abdominal tissue that has protruded through a tear in the wall of muscle and tendon that surrounds the abdomen. Picture your favorite arm chair: you know, the one with the stuffing bulging through the seat back? Same concept.

## What Causes a Hernia to Develop?

We tend to think of hernias as being the result of lifting very heavy objects. In fact, they can have any number of causes. These include sports activities, overexertion, coughing or sneezing, or a natural weakness in the abdominal wall that is present at birth.

## Who Is Most Susceptible?

According to the National Center for Health Statistics, as many as five million Americans suffer from hernias. Hernias can occur in both men and women of all ages, as well as in children. However, hernias tend to be much more common in men, occurring most often in the groin area where the abdominal folds meet the thighs. These are known as inguinal hernias and are caused in part by the (normal) descent of the testicles into the scrotum. This creates an unsupported area in the groin, which allows a tear or rupture through which abdominal tissue can protrude.

Women tend to suffer from hernias at the top of the thigh (the femoral area), very often resulting from the strain of pregnancy and childbirth.

Children are most susceptible to inguinal hernias, with the large majority of these occurring in boys. Infants are also susceptible to umbilical hernias. These generally appear as a protrusion in the navel area. Umbilical hernias in infants tend to be less troublesome than other types of hernias, since they tend to heal without any treatment by the time the child is three or four. In some cases, however, they may not heal completely until age 10 or 11. A pediatric professional should be able to diagnose and recommend treatment for all types of hernias in children.

## How Do I Know I Have One?

Generally, you'll notice a small lump somewhere in the groin or abdominal area. This lump will often, but not always, be accompanied by a dull ache that increases in intensity with physical exertion. In the early stages, many hernias are reducible; that is, you can push the tissue gently back into its normal place. Over time, the degree of pain may increase. If you notice a bulge that does not resolve, or you develop pain at the site, you should seek medical treatment.

## Are They Dangerous?

The actual bulge or rupture in the abdominal wall itself is not dangerous. But if left unattended, the resulting protrusion through this hole or gap can cause increasing amounts of pain, as more of the abdominal tissue pushes through the gap. As long as the hernia is reducible, it is not dangerous. However, a non-reducible hernia can become life-threatening if a part of the bulging tissue becomes trapped in the tear or opening (a strangulated or incarcerated hernia).

## Will It Heal by Itself?

Unfortunately, no. With the exception of umbilical hernias in infants, hernias will not go away on their own. It can take months or even years to worsen. If you suspect that you or your child may have a hernia, it should always be checked by a healthcare provider because of the possible danger of strangulation.

In the short term, reducing strenuous physical activity, losing weight, and/or wearing a truss can lessen the discomfort and pain caused by a hernia. However, ultimately, the only "cure" for a hernia is surgery.

## What Are the Various Surgical Options?

### Open Hernia Surgery

This conventional method is performed by making an incision over the site of the hernia. The part of the intestine or other tissue bulging through is then placed back into the abdominal cavity. Finally, the abdominal wall is repaired by stitching the surrounding muscle together.

Unfortunately, this method has a number of drawbacks. Recovery time can be as much as four to six weeks. And, scar tissue that develops around the sutures can later pull apart, necessitating further surgery to repair it (recurrent hernia).

### Open Mesh Surgery

This new type of hernia surgery uses a mesh plug. Here, a small incision is made at the hernia site. The bulging tissue is then returned to the abdominal cavity. The repair of this area is completed by first sealing the hernia rupture or hole with a plug made of a sterile mesh material, and then suturing a piece of sterile mesh material over the mesh seal.

Open mesh surgery has grown in popularity because it can be performed under local anesthesia, and patients tend to experience less pain and are able to return to normal activities much sooner than with conventional open hernia surgery. Moreover, though no conclusive statistics are yet available, the recurrence of a hernia following the open mesh method seem to be quite low.

### Laparoscopic Surgery

Under general anesthesia, a surgeon inserts small tubes through the abdominal wall one of which is a tiny video camera and performs the surgery while viewing the hernia on a TV monitor. As with the open mesh method, mesh is used to repair the hernia site.

Many physicians consider the laparoscopic method of hernia repair superior to conventional hernia surgery. Recovery is quicker, and there is a low rate of recurrence, although conclusive recurrence statistics are not yet available. However, some surgeons use this method less frequently. As Dr. Peter Mowschenson, assistant professor of surgery at Harvard Medical School, points out, the laparoscopic method does require general anesthesia, tends to be more expensive, and can be more invasive than the open mesh method. As a result, some surgeons will reserve the laparoscopic method for the repair of more complicated bilateral hernias and recurrent hernias.

## RESOURCES:

HerniaInformationPage  
<http://www.hernia.org/>

HerniaResourceCenter  
<http://www.herniainfo.com>

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Last reviewed October 2007 by [Rosalyn Carson-DeWitt, MD](#)

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