

**Patient Information Sheet:**

**Laparoscopic Inguinal Hernia**

**What is an inguinal hernia?**

An inguinal hernia develops when an opening from the abdomen that extends into the groin does not close during fetal development.

- ★ When a baby boy is developing in the womb the testicles start in his abdomen and then travel down into the scrotum. This tunnel usually closes. However, if the tunnel does not close the opening remains and bowel or an ovary can get trapped.
- ★ Baby girls have the opening as well, it is called the processus vaginalis.

Inguinal hernias in children are common. They are more common in premature babies and males.

Inguinal hernias will not close on their own and require surgical repair. It is usually recommended that they are repaired shortly after they are identified to decrease the risk of bowel or ovaries getting stuck.

**Questions You May Have**

It's normal to have concerns about your child's surgery. Here are answers to some common questions:

**Is surgery safe?** Yes. Complications from hernia surgery are rare. In fact, most children get back to normal in a very short time.

**Will my child be in pain during surgery?** No. Your child will be given medications that make him or her sleep during surgery. The Anesthesiologist will speak with you and your family on the day of surgery regarding the plan for your child. Some mild discomfort after the operation is normal.

**Inguinal Hernia**



**Is surgery always needed?** Yes. If a groin (inguinal) hernia is not treated, part of the intestine can become trapped or “strangulated”. This means the blood to that part of the intestine is cut off. At that point it becomes a medical emergency and they need surgery right away. Having the repair done soon, will help to prevent this problem from happening.

**Do you use mesh?** We do not traditionally use mesh in kids because kids grow. . . and mesh does not. In older kids (teenagers) depending on the size of the child we may decide to use mesh to repair the defect.

### Preparing Your Child for Surgery

Follow your doctor’s advice to help get your child ready for surgery. You may be asked to:

Tell the doctor about any medications your child takes, including children’s pain relievers.

Accompany your child during tests. These may include urine and blood tests.

In general, guidelines for eating prior to surgery are as follows:

8 hours before surgery: no more solid food – clear fluids only

6 hours before surgery: no more formula – clear fluids only

4 hours before surgery: nothing by mouth – no more breast milk or clear fluids

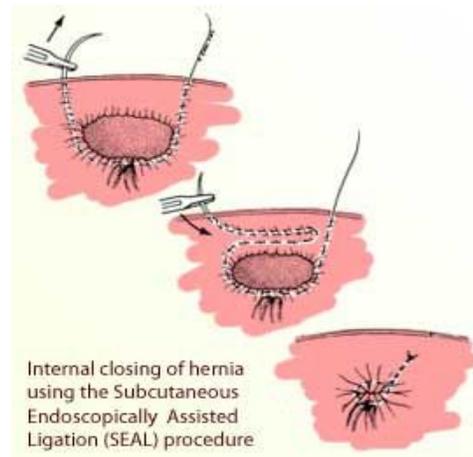
Our office will call and let you know the specific directions for your child.

### The Day of Surgery

A health care provider will give your child an intravenous (IV) to provide fluids and medications. You’ll then meet with the anesthesiologist. He or she will talk with you about the anesthesia used to prevent pain during surgery. The type of surgery your child has depends on the location of the hernia. If your child has a related problem, such as an undescended testicle, it may also be repaired at the same time as the hernia.

### Repairing an Inguinal Hernia Laparoscopically

An small incision is made in umbilicus (belly button) through which a camera is inserted. Then a small incision is made in the abdomen (3mm) for the laparoscopic instrument. Finally, there will be a needle mark in the groin directly over the hernia (two needle marks if there are hernias on both sides). Using those small incisions the hernia is repaired using the camera and instruments. All of the sutures (stitches) are underneath the skin. There is a permanent suture at the repair which will stay



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**Alaska Pediatric Surgery, LLC**

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for life, the other sutures will dissolve. We do **not** use mesh in children.

### **Your Child's Recovery**

Your child can likely go home the same day as surgery. Don't worry if you notice some swelling or bruising. This is normal and should go away in a short time. To help speed recovery, encourage your child to move around. But children should avoid rough play for about a week. After that, it's okay to let them get back to doing things they enjoy. If you have questions or concerns, be sure to talk with the doctor during follow-up visits.

### **Risks and Complications:**

Inguinal hernia repairs for children are safe, but with every procedure there are some risks. These include:

- Bleeding
- Infection
- Risk of recurrence of the hernia,
- Need for additional procedures
- Risk of damage to surrounding tissue,
- Risks associated with anesthesia.

### **When to call our office:**

After surgery, call our office if your child has any of the following:

A large amount of swelling or bruising. A small amount is normal, but if you are concerned please call us.

- Fever over 100.4°F (38.0° C)
- Increasing redness of drainage of the incision
- Bleeding
- Increasing pain
- Nausea or vomiting
- With any concerns you have.

**\*\*Call Alaska Pediatric Surgery with questions or concerns 929-7337\*\***

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(Last edit 4/2019)

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