

Further information can be obtained from:

NHS 111	Dial 111
Or contact your GP	
Bluebell Ward, Lister Hospital, Stevenage	01438 284008
Children's Day Services, Lister	01438 286315
Children's A&E, Lister	01438 284333
QEII Urgent Care Centre Welwyn Garden City	01707 247549
Lister Community Children's Nurses	01438 284012
QEII Community Children's Nurses	01438 288370
Patient Advice and Liaison Service	01438 285811

Inguinal Hernia Repair

Child Health Patient Information Leaflet

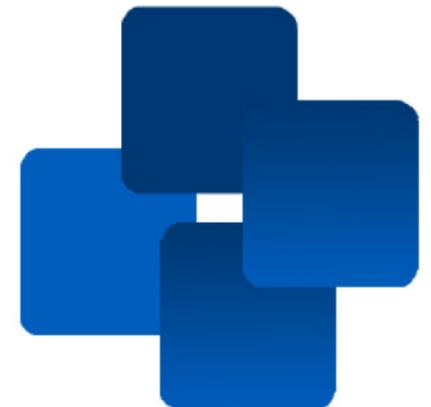


The information in this leaflet was taken from www.cks.nhs.uk

Date of publication: June 2007
Author: Paediatric Leaflet Information Group
Reference: CH/130L Version: 4
Review Date: April 2019
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www.enherts-tr.nhs.uk

You can request this
information in a different
format or another language.



Introduction

The purpose of this leaflet is to explain **Inguinal Hernia Repair**.

What is an inguinal hernia?

As a male baby grows and matures during pregnancy, the testicles develop in the abdomen and then move down into the scrotum through an area called the Inguinal Canal. Shortly after the baby is born, the inguinal canal closes, preventing the testicles from moving back into the abdomen. If this area does not close off completely, a loop of intestine (bowel) can move into the inguinal canal through the weakened area of the lower abdominal wall and cause a hernia.

Although girls do not have testicles, they do have an inguinal canal, so they can also develop hernias in this area.

The operation

Your child will be admitted into hospital for a day and will need a general anaesthetic for the procedure to be done.

A hernia repair is a small operation. Complications are uncommon. Possible risks are:

- The wound becoming infected and your child needing antibiotics.
- The loop of bowel becoming trapped (strangulated) which would mean removing that section of bowel and rejoining the ends
- The hernia returning (a very small risk). Sometimes, if the hernia has been large, some excess skin remains after the operation, but this will usually settle as your child grows up.

After the operation

Your child will have had a general anaesthetic. Anaesthetic drugs remain in the body for 24 hours or more and gradually wear off over this time. It is therefore important that your child remains with a responsible adult and will need to rest after discharge from hospital.

The dressing that has been used to cover your child's wound must be left in place for five days after their operation and kept dry. Bathing during this period should be avoided where possible to ensure good healing. Any stitches that were used to close the wound will dissolve and do not need to be removed.

A normal bathing routine can be resumed as soon as you feel it necessary. Do not use bubble bath or other additives in the water. Avoid swimming until the wound is completely healed. If you have any concerns please contact your GP or Children's Day Services for advice.

There will be some bruising and tenderness after the operation. It is recommended that you give regular pain relief for 24 hours post-operatively. Paracetamol or Ibuprofen should be sufficient. Your child's nurse will give you advice regarding this.

Your child will be checked over by the surgeon before discharge home and an appointment will be made for you to bring your child back to outpatient clinic in two weeks time.

On your return home please encourage your child to drink plenty of fluids and offer a light diet, avoiding greasy foods.

Your child will probably find their own level of activity but, as a general guide, should not attend school/nursery for a week and avoid contact sports such as football, rugby or judo for about 10 days after the operation.