HERNIAS ARE MORE COMMON THAN YOU THINK

There are an estimated 3 million new hernia cases in the United States each year, a painful condition for those they affect. “They’re one of the most common surgical problems I see,” said Dr. Matthew Johnson, Acute Care Surgeon and Robotic Surgeon at Sunrise Hospital & Medical Center and Desert Surgical Associates. “I see many patients that come to my office for a hernia consultation, and it’s also very frequent in the emergency room for patients needing emergency surgery.”

The severity of hernias can vary greatly, as can the cause and type of hernia.

WHAT CAUSES A HERNIA?
Hernias are caused by weaknesses in the abdominal wall tissues. Because of this, there are many potential reasons a patient could get a hernia, including age, chronic coughing, pregnancy, constipation, heavy weight lifting or sudden weight gain. Hernias also can be congenital, meaning the condition exists from birth. Congenital hernias can include belly button or umbilical hernias, and groin or inguinal hernias, Johnson said.

Patients are especially susceptible to hernias after they’ve had abdominal surgery. Surgery can weaken the fascial tissue surrounding abdominal muscles, leading to a breach or separation. There are several factors that can influence your likelihood of developing a hernia after surgery:

1. Women who have C-sections or hysterectomies or men who have abdominal surgeries.
2. How the tissue was closed during surgery.
3. Smoking. Nicotine directly damages blood vessels, which negatively affects healing post surgery.
4. If surgical incisions get infected, surrounding tissue won’t heal as well and scars won’t form as tightly, which can allow hernias to develop.

SYMPTOMS
1. Newly discovered lump in the abdominal wall or groin
2. Pain at suspected hernia site
3. Bowel obstruction coinciding with the lump
4. Groin or swelling of the scrotum

WHAT SHOULD I DO IF I HAVE A HERNIA?
While there are home remedies that can ease the discomfort of a hernia, all patients should have their hernias checked by a doctor. “If you develop a lump in your groin or abdomen, see a surgeon sooner rather than later” or visit your primary care physician for a surgical referral, Johnson said. “The longer you wait, the larger a hernia can get and the more difficult it is to repair. If it’s small, it’s easy to fix, but if it gets larger, the more complications you can have.”
HOW ARE HERNIAS REPAIRED?
Hernias typically are repaired using a synthetic or biologic mesh to patch the defect in the abdominal wall. "The mesh acts as a bridge to cover the hernia or the hole in the fascia," Johnson said. The mesh can be inserted using different surgical techniques, but the preferred methods are laparoscopic or robotic surgery. Both are minimally invasive, meaning shorter healing time, a decreased risk of infection and less scarring. Johnson estimates 95 percent of hernia surgeries are either laparoscopic or robotic. "The minimally invasive approach is better, hands down," Johnson said. "If one of my family members or myself developed a hernia, I would recommend minimally invasive surgery for repair."

RISKS
If left untreated, hernias can become incarcerated and require emergency surgery. An incarcerated hernia occurs when the protruding organ or fat becomes pinched so tightly that it cannot be pushed back into the abdomen or groin. Over a few hours an incarcerated hernia can turn into a strangulated hernia when it is pinched so tightly that the blood flow is cut off to that organ or piece of internal fat," said Johnson. "Incarcerated hernias and especially strangulated hernias are a surgical emergency and need to be repaired immediately."

Laparoscopic surgery
Surgeons make a series of small incisions, rather than a large surgical opening, to insert the mesh. With this method, there is a decreased risk of infection because the incisions are small.

Robotic surgery
Incisions are similar to laparoscopic surgery, but the surgeon uses the da Vinci surgical robot to assist with performing the surgery. The surgeon operates the robot from an adjacent console, using a screen with a high definition 3-D image from inside the patient’s body. Robotic surgery enables a wider range of motion than laparoscopic surgery, often meaning fewer and smaller incisions. "The robotic arms have a much higher degree of freedom of movement and rotation than a surgeon’s hands," Johnson said. "And the visualization of all the bodily structures and the hernia with the 3-D camera makes it easy to see. It’s a lot easier to fix hernias robotically and a lot quicker."

HOW TO PREVENT HERNIAS
Diet and exercise
Core building in particular strengthens abdominal muscles. "Over time, abdominal musculature atrophies, and that causes definite weakness or decreased strength in the abdominal wall," Johnson said. "That’s why we see hernias in a lot of older individuals."

Stop smoking
Smokers scheduled for surgery should stop smoking immediately. Johnson said. Smoking can damage blood vessels and slow healing. And prior surgery is one of the most common causes of hernias.