
Understanding Your Child's Inguinal (Groin) Hernia Repair

A groin hernia is when a loop of intestine or other belly (abdominal) organ pokes through a weak area of muscle into the lower abdomen. The weak area of muscle is formed that way before birth. The sac is formed by tissue that lines the abdomen. This kind of hernia usually happens on one side of the groin. It's felt as a bulge under the skin.

Groin hernias are common in children. They happen most often in boys. They don't go away on their own. If left untreated, the hernia can cause a serious problem. Groin hernias in children can be repaired with surgery in about 1 hour. Most children go home the same day and get better quickly.

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 their normal life in a short time.
- **Will my child be in pain during surgery?** No. Your child will be given medicines that make them sleep during surgery. Some mild discomfort after the surgery is normal and can be safely treated.
- **Is surgery always needed?** Yes. If a groin hernia is not treated, part of the intestine or other abdominal organs can become trapped. This means the blood to that part is cut off. If this happens, it is a medical emergency and needs treatment right away. Having hernia repair surgery will prevent this problem from happening.

Preparing your child for surgery

Follow your healthcare provider's advice to help get your child ready for surgery:

- You will be asked to sign a forms for the surgery and anesthesia. Be certain all of your questions about the procedure are answered before you sign the forms.
- Tell the healthcare provider about any medicines your child takes. These include children's pain relievers, vitamins, and other supplements.
- Come with your child to tests. These may include urine and blood tests.
- Don't let your child eat or drink after midnight the night before surgery.

The day of surgery

You'll meet with the anesthesiologist or nurse anesthetist. They will talk with you about the anesthesia used to prevent pain during surgery and what to expect after surgery. Your child will be given an IV (intravenous) to provide fluids and medicines. This may occur in the operating room while your child is receiving anesthesia through a mask.

During the surgery

The surgery may be done with laparoscopic methods. This uses 2 or 3 tiny incisions and a small tool called a laparoscope. Or it may be done with open surgery through 1 larger incision. The surgeon will talk with you about which method is best for your child.

Your child's recovery

Your child can likely go home the same day as the surgery. Once at home, encourage rest and give your child pain relievers as directed. Care for the incision area and bandage as advised. A small amount of swelling and bruising is normal and will go away in a short time. Don't let your child shower, take a bath, or get in a swimming pool or hot tub until the healthcare provider says it's OK. Most children can go back to normal activity in a couple of days. To help speed recovery, encourage your child to move around. If you have questions or concerns, talk with the healthcare provider during follow-up visits.

Risks and possible complications

Hernia surgery for children is generally safe, but does have some risks, as do all surgeries. These may include:

- Bleeding
- Infection
- Numbness or pain in the groin or leg
- Inability to urinate
- Risk the hernia will recur
- Bowel or bladder injury
- Problems from the mesh
- Damage to the testicles or ovaries
- Anesthesia risks

When to call your child's healthcare provider

After surgery, call your child's healthcare provider if any of the following occur:

- A large amount of swelling or bruising
- Fever (see Fever and children, below)
- Increasing redness or drainage of the incision
- Bleeding
- Increasing pain
- Nausea or vomiting

- No bowel movement for 3 days after surgery
- Symptoms that get worse or new symptoms

Fever and children

Use a digital thermometer to check your child's temperature. Don't use a mercury thermometer. There are different kinds and uses of digital thermometers. They include:

- **Rectal.** For children younger than 3 years, a rectal temperature is the most accurate.
- **Forehead (temporal).** This works for children age 3 months and older. If a child under 3 months old has signs of illness, this can be used for a first pass. The provider may want to confirm with a rectal temperature.
- **Ear (tympanic).** Ear temperatures are accurate after 6 months of age, but not before.
- **Armpit (axillary).** This is the least reliable but may be used for a first pass to check a child of any age with signs of illness. The provider may want to confirm with a rectal temperature.
- **Mouth (oral).** Don't use a thermometer in your child's mouth until they are at least 4 years old.

Use a rectal thermometer with care. Follow the product maker's directions for correct use. Insert it gently. Label it and make sure it's not used in the mouth. It may pass on germs from the stool. If you don't feel OK using a rectal thermometer, ask the healthcare provider what type to use instead. When you talk with any healthcare provider about your child's fever, tell them which type you used.

Below is when to call the healthcare provider if your child has a fever. Your child's healthcare provider may give you different numbers. Follow their instructions.

When to call a healthcare provider about your child's fever

For a baby under 3 months old:

- First, ask your child's healthcare provider how you should take the temperature.
- Rectal or forehead: 100.4°F (38°C) or higher
- Armpit: 99°F (37.2°C) or higher
- A fever of _____ as advised by the provider

For a child age 3 months to 36 months (3 years):

- Rectal or forehead: 102°F (38.9°C) or higher
- Ear (only for use over age 6 months): 102°F (38.9°C) or higher
- A fever of _____ as advised by the provider

In these cases:

- Armpit temperature of 103°F (39.4°C) or higher in a child of any age
- Temperature of 104°F (40°C) or higher in a child of any age

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- A fever of _____ as advised by the provider