Children's inguinal hernia repair

Children's inguinal hernia is a minor embryonic developmental disorder, which does not necessarily present itself for several years. The hernia is a thin-walled bulging sac under the skin formed by the peritoneum (the inner membrane lining the abdomen) protruding through the inguinal canal.

Procedure
In the surgery, which is performed under general anaesthesia, the bulging sac formed by the stretched peritoneum is tied from its base and removed.

Treatment of pain
At the final stage of the operation, the area around the wound is anaesthetized with a long-term local anaesthetic, so that the post-operative pain would be minimal. The patient experiences pain in the wounds for a few days. It is recommended to give regular pain relief to the child for the first few days after the procedure, e.g:

Paracetamol

Anti-inflammatory

Wound care
After the operation, swelling and bruising may occur on the wound and scrotum. The swelling disappears within a few weeks. The wound has absorbable sutures that do not need to be removed. The child may shower after 24 hours and go to sauna after a week from the procedure.

Recovery
The anaesthetic applied to the wound may cause temporary weakness in the leg of the operated side. On the day of the surgery, the child requires rest and adult supervision. The child may move within the limits allowed by the pain. The child may go to school/day-care after a couple of days. Bigger children should not participate in physical education for two weeks.

Contact us
If problems in healing arise, contact:

Day Surgery Unit on working days from 07.00 – 17.00 tel. (06) 213 1552,
Emergency Department at other times tel. (06) 213 1001, or
Health centre or child health clinic

• This instruction is intended for our patients who are in a care relationship •