

WHAT IS A HERNIA:

A hernia occurs when part of your insides bulges through an opening or weakness in the muscle or tissue that contains it.

Most hernias involve one of your abdominal organs pushing through one of the walls of your abdominal cavity.

Hernias can occur gradually as you get older and regular wear and tear on your muscles begins to add up.

They can also result from an injury, surgery or birth disorder.

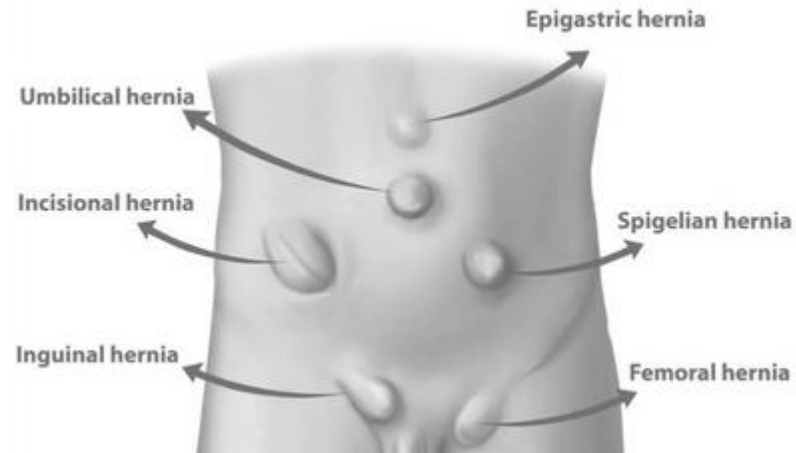
A hernia can be repaired in different ways and involves an incision to the skin overlying the hernia.

The bulge is pushed back and the weak part of the muscle strengthened. The incision is then closed with dissolvable sutures.

Under the Community Surgical Scheme a hernia repair is only performed under a local anaesthetic.

However not all hernias are suitable for repair under local anaesthetic and a general anaesthetic may be necessary for some patients, If this is confirmed to be the case, your GP will arrange a referral into Secondary care.

FEMORAL HERNIA



The femoral canal houses the femoral artery, smaller veins, and nerves. It's located just below the inguinal ligament in the groin.

A femoral hernia can also be called a femorocele.

Women are more likely than men to suffer from a femoral hernia. Overall, femoral hernias are not common.

Most femoral hernias do not cause symptoms. However, they can occasionally lead to severe problems if the hernia obstructs and blocks blood flow to your intestines.

This is called a strangulated hernia — it's a medical emergency and requires immediate surgery.

PRE-OPERATIVE ASSESSMENT:

On receipt of your referral we will arrange to see you for a Pre-operative assessment.

You will be seen by the Surgeon, who will ask you questions relating to your past medical history and any medications you may be taking. The surgeon will examine you so that a diagnosis can be confirmed.

If a procedure is not required, you will be advised of this by the Surgeon who will inform the GP who referred you to this service.

If a procedure is necessary and can be performed under a local anaesthetic, this will be discussed with you at the consultation.

You will also discuss any pain relieving medication that will be required following your procedure. Please ensure that you obtain the pain medication prior to your admission so that you have this at home on discharge.

Our team will contact you shortly after the consultation to arrange your actual procedure appointment, if it is necessary for you to stop taking medication prior to your procedure, you will be sent instructions along with your appointment confirmation and any other relevant instructions.

Your appointment will take approximately 60 minutes.

PRIOR TO YOUR PROCEDURE:

You may eat and drink up to two hours prior to your admission.

You are advised not to bring any valuables with you during your stay as we are unable to take responsibility for these.

Please do not wear jewellery other than a wedding band.

You may be asked to shave the area, if so please do this 24 Hrs before your appointment.

You must arrange for someone to drive you home following your procedure. You will be on the unit for approximately 90 minutes in total.

You will also need to have a responsible adult who can stay with you for 24 hours following your discharge home.

It is important that you do not drive, operate machinery, sign any important legal documents or drink alcohol for 24 hours, as your judgement will be slightly impaired and reactions much slower.

You will be asked to share the information of the person who will be responsible for looking after you following your discharge home.

FOLLOWING YOUR PROCEDURE:

You will be able to go home approximately 30 minutes following your procedure.

A member of the Nursing Team will discuss your aftercare information with you and answer any concerns or questions you may have.

You are likely to tire easily for the first few weeks following your procedure. Resting at regular intervals is advisable. You will gradually improve so that you have regained your usual level of activity within four to six weeks following your procedure.

On discharge, you will receive some information regarding your rehabilitation.

You are advised not to drive for approximately three weeks. It is important before driving for the first time that you feel confident that you can reverse and perform an emergency stop.

You are advised to refrain from work for approximately two to six weeks depending on the nature of the work you do.

You should be able to return to desk work after two weeks and any non-manual work within two to four weeks. You should not undertake heavy work for four to six weeks.

If you need a fit note then please ask your surgeon on the day of the procedure.

Femoral Hernia Information Leaflet



Bring Healthcare Closer to Home

Community Surgical Scheme

Telephone: (01507) 631297

Mon - Fri

Between 09:00 and 17:00

WHAT IS A HERNIA:

A hernia is a bulge or weakness in the muscles which form the front of the body wall.

It can be caused by the body wall being weak from birth or sometimes the body wall can weaken with the passing of time or if the body is overstrained by coughing, heavy lifting or sport.

Hernias are very common and are easily treated. If they are left untreated they get bigger and can cause a blockage or strangulation of the bowel.