

Strangulated Hernia

What Is A Strangulated Hernia?

Whilst strangulation is a relatively rare complication of hernias it can occur with any type of hernia. Strangulation risk is probably greatest with femoral hernias.

Why Does Strangulation Occur?

Strangulation occurs when tissue, usually part of the bowel gets trapped inside the hernia. This could occur after a bad bout of coughing or heavy lifting. Strangulation is more likely to happen if the hernia opening is quite narrow. Very big hernias, with big openings are probably less likely to get stuck.

Once tissue inside the hernia gets stuck the narrowness of the opening can put pressure on the blood vessels carrying blood to and from the trapped tissue. This stops blood getting out of the affected tissue to begin with. As a result, the tissue in the hernia swells up and this puts more pressure on the blood vessels so that eventually blood cannot get into the trapped tissues either. When this happens the trapped tissue will die very quickly unless the blood flow is restored i.e. the hernia is repaired.

If the trapped tissue is a part of the bowel it will become gangrenous, micro-organisms will leak out and cause infection in the surrounding tissues. If left untreated the bowel will eventually perforate or pop and bowel contents will leak out into the hernia space and the tissues round about. Bowel strangulation in a hernia can have serious implications and in some cases lead to life threatening complications.

How Do We Treat A Strangulated Hernia?

A strangulated or suspected strangulated hernia always requires an operation. You will be sent into hospital. Sometimes its not always easy to make the diagnosis and X-Rays, CT scans or an ultrasound scan maybe required.

Most patients will need to have antibiotics and intravenous fluids before they go for operation.

Nearly all surgery for strangulated hernias is carried out via an open technique. The most important part of the operation is to relieve the strangulation. If operated on soon enough trapped bowel will recover. If it has been left too long it may already be dead. In this case the surgeon will need to remove the dead bowel and rejoin two healthy ends. Often this will involve making a much larger incision than would be required with a non-strangulated hernia. If there is infection in the tissues most surgeons would not risk use a synthetic mesh to repair the hernia as there is a very high risk of this getting infected. The repair is often done with sutures or if necessary a biological mesh.

Hospital stay and recovery after emergency surgery for a strangulated hernia is usually much longer than for planned surgery for a non-strangulated hernia.

Sometimes severe sepsis can result from bowel gangrene and perforation and this can have life threatening consequences.

After The Operations

We encourage all patients to stay active following surgery. Walking regularly is useful exercise after the operation.

Following the operation you should avoid heavy lifting for 4-6 weeks.

After about 4 weeks you should be able to increase your exercise activities. Starting with gentle rhythmic

exercises such as cycling or cross-training and gradually building up to your normal exercise regimen. Provided there are no wound problems swimming can also be good at this stage.

You should be able to return to work within one or two weeks but if your job involves any strenuous activities you may need to be off work for longer or carry out only light duties.

Patients can usually drive again after one to two weeks but your surgeon will give you specific instructions regarding this.