

## Deciding what to do about inguinal hernia

This short decision aid is to help you decide what treatment to choose if you have an inguinal hernia.

This document is a summary of the online patient decision aid which has much more information to help you. You can access it online at :<http://sdm.rightcare.nhs.uk/pda/inguinal-hernia/>

The main treatment options for inguinal hernia are:

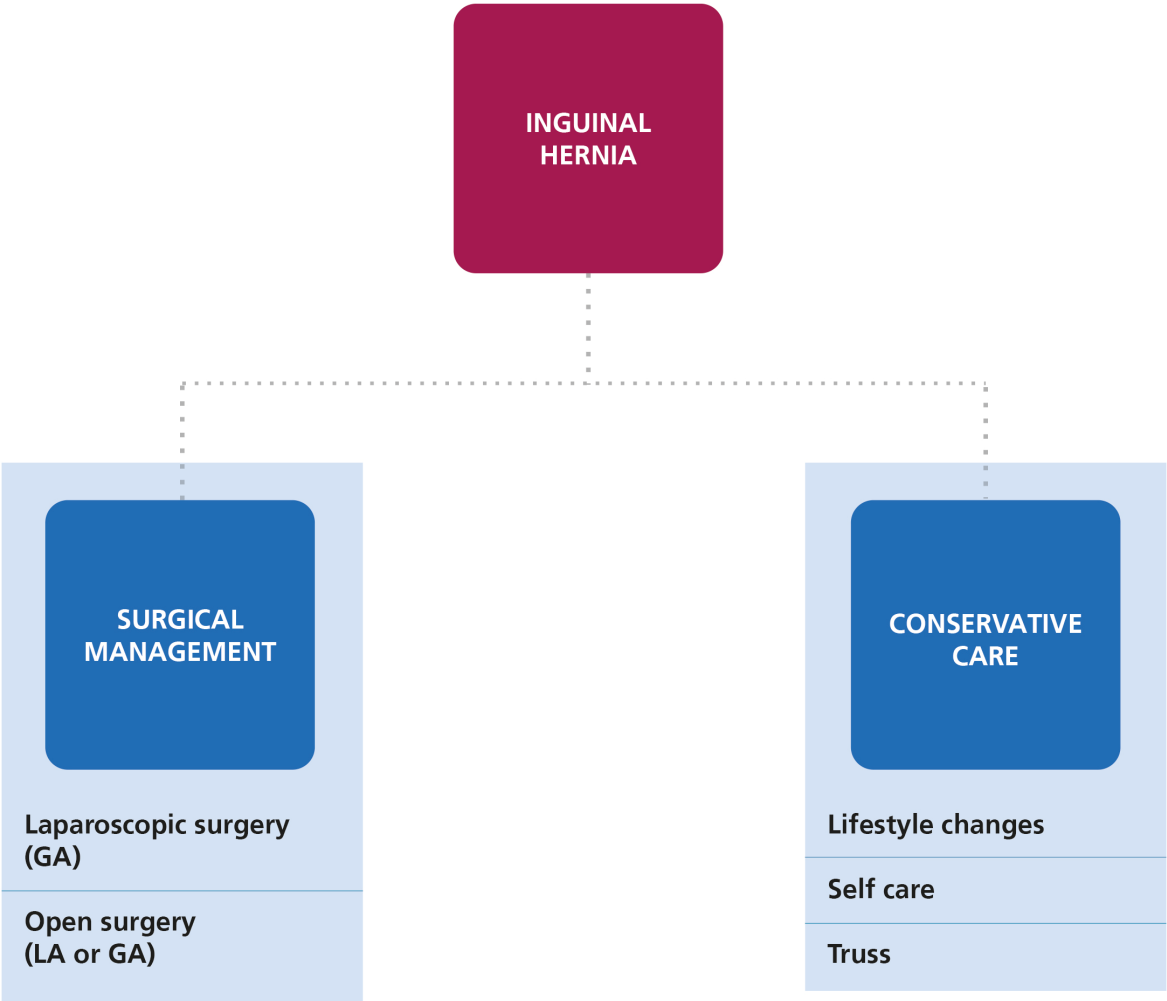
- Surgical repair. This is an operation. It can be done in two main ways: open surgery, where a single cut (incision) of approximately 10 centimetres is made in the groin area in order to reach the hernia and repair it; or 'keyhole' surgery, (laparoscopy), where the operation is carried out using keyhole/ laparoscopic instruments through several small (less than 1 centimetre) cuts (incisions).
- Conservative treatment. This means living with the hernia, making lifestyle changes and watching for changes to the hernia. It can include: avoiding straining or heavy lifting; wearing a special belt called a 'truss'; waiting to see if symptoms (pain or discomfort) appear or get worse.

Anyone who decides to have surgery will have conservative treatment while waiting for the operation. The choices people make will depend on how much the hernia is affecting them, how long they have had it, how active they are in their daily lives, other medical problems they may have and what treatments they have already tried.

The decisions people with inguinal hernia are making include:

- My hernia is painful. Should I have an operation?
- My hernia is not painful. Should I have an operation?
- If I have conservative treatment now can I still decide to have an operation later?
- If I make changes to my lifestyle will my hernia get better on its own?

The right choice for people with inguinal hernia may change over time. This decision aid aims to help people make the right choice for them now, but they may want to change their minds as their hernia or their life changes.



## What are my options?

|  | Conservative treatment   | Surgical repair   |
|--|--|---|
| <b>What is the treatment?</b>                        | Conservative treatment means living with the hernia, making lifestyle changes and watching for changes to the hernia. Lifestyle changes may include giving up smoking and avoiding heavy lifting, or wearing a special belt called a 'truss'.  | This is an operation to push the hernia back into the abdomen. It can be done by: open surgery, where one large cut (incision) is made in the groin area in order to reach the hernia and repair it; or 'keyhole' surgery (laparoscopy), where the operation is carried out using a few small cuts.   |
| <b>What is the effect on your symptoms?</b>          | Symptoms don't go away completely with conservative treatment and may get worse if the hernia gets bigger. If this happens people can always change their minds and have surgery.  | Most people with inguinal hernia are free of symptoms by two weeks after surgical repair. But about 30 out of 100 people continue to feel pain and discomfort at the site of the repair. [1] [2]  |
| <b>What are the potential health problems?</b>       | The main possible complications of conservative treatment are that the hernia will get bigger and more uncomfortable, or become stuck (irreducible) in the groin or scrotum. When this happens an emergency operation may be needed to prevent serious complications like bowel obstruction and strangulation. Women with inguinal hernias are more likely to have emergency operations than men. They also have a higher chance of having part of their bowel removed because of complications. [3] | The main short-term possible complications of surgical repair are: [4] [5] bruising, swelling and numbness, difficulty passing urine and infection of the wound. Just over 22 people in 100 get complications after surgery. The main long-term possible health problems are: chronic pain that may last for several years, and recurrence of the hernia. [6] |
| <b>What are the effects on your quality of life?</b> | People having conservative treatment while waiting for surgical repair of inguinal hernia say they have a worse quality of life than people of similar age and health status. Quality of life is lowest for people with the largest hernias. Manual workers tend to have lower quality of life than those in sedentary jobs. [7]   | Quality of life after surgical repair depends on whether or not symptoms persist. People left with chronic pain and discomfort report a lower quality of life than those who are symptom-free. [8] [9]  |

|   | Conservative treatment   | Surgical repair   |
|---|--|---|
| <b>What are the effects on your life?</b> | Conservative care will have little effect on the lives of people with inguinal hernias that cause few, if any, symptoms. Hernias that cause pain or discomfort can limit leisure activities and cause people to take time off work. [10] | Both types of surgery for inguinal hernia can be done as day surgery without needing to stay overnight in hospital. People who have complications may need to stay longer. It can take between three and four weeks to recover completely. People usually need about seven days off work and 14 days before they can return to strenuous leisure activities. About seven in 100 people can't return to work and 17 in 100 can't go back to strenuous leisure activities after 30 days either because of pain or problems with the wound. [11] |

## What are the pros and cons of each option?

People with inguinal hernia have different experiences about the health problem and views on treatment. Choosing the treatment option that is best for the patient means considering how the consequences of each treatment option will affect their life.

Here are some questions people may want to consider about treatment for inguinal hernia:

- How concerned am I about the risks of surgery?
- How important is it for me to be free of pain and discomfort?
- How important is it to me to avoid complications in the future?
- If I value my quality of life most of all, which treatment is best for me?
- Do I have strong preferences about staying out of hospital?
- How important is it to me that my hernia does not come back if I decide to have surgery?