HERNIAS

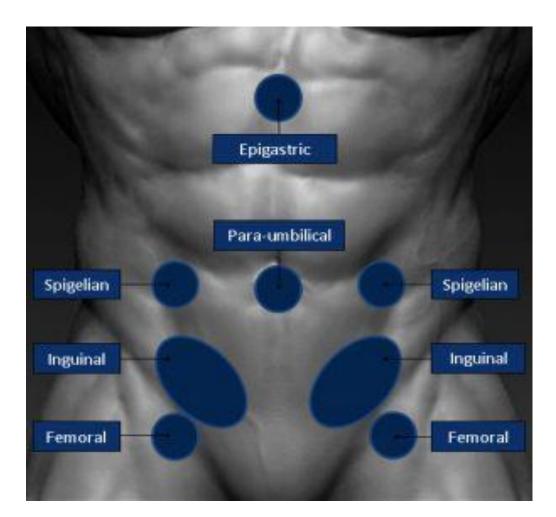
Presentation of suggestions and information gathered from multiple websites by Karen Hollis Retired RN, WOCNurse

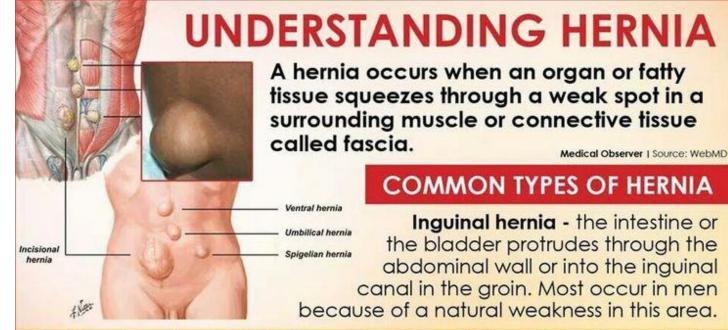
OBJECTIVES

- 1. Define hernia.
- 2. Demonstrate multiple sites of hernias.
- 3. Discuss parastomal hernia.
- 4. Discuss hiatal hernia.
- 5. Discuss herniated disc.
- 6. Discuss treatment options.
- 7. List symptoms of different hernias.
- 8. Special note regarding parastomal hernia.

Definition

- Protrusion of internal organ, tissue or part of an organ through the wall of the cavity that normally contains it.
- Many areas of the body can herniate: abdomen, umbilicus, spinal disc, etc.





Incisional hernia - the intestine pushes through the abdominal wall at the site of previous abdominal surgery. Most common in elderly or overweight people who are inactive after abdominal surgery.

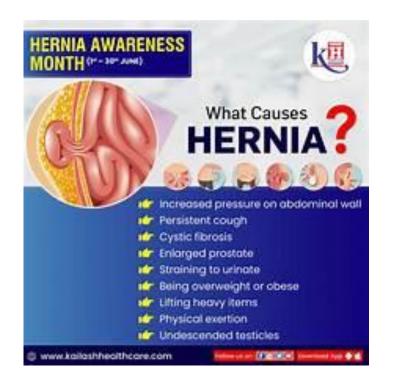
Femoral hernia - occurs when the intestine enters the canal carrying the femoral artery into the upper thigh. most common in women, especially those who are pregnant or obese.

Umbilical hernia - part of the small intestine passes through the abdominal wall near the navel. Common in newborns, it also commonly afflicts obese women or those who have had many children.

Hiatal hernia - happens when the upper stomach squeezes through the hiatus, an opening in the diaphragm through which the esophagus passes.

Lifting heavy objects without stabilizing the abdominal muscles, diarrhea or constipation, Persistent coughing or sneezing, obesity, poor nutrition, and smoking, can all weaken muscles and make hernias more likely.

What causes a HERNIA



- Increased pressure on abdominal wall
- Persistent cough
- Cystic fibrosis
- Enlarged prostate
- Straining to urinate
- Being overweight or obese
- Lifting heavy items
- Physical condition
- Undescended testicles

Parastomal Hernia

Parastomal hernia is a type of incisional hernia that occurs at the site of a stoma or immediately adjacent to the stoma.

The most common late complication of a permanent stoma.

Incidence of Parastomal Hernia

50% Colostomy [Nugent, 1999]

28% Ileostomy [Williams, 1990]

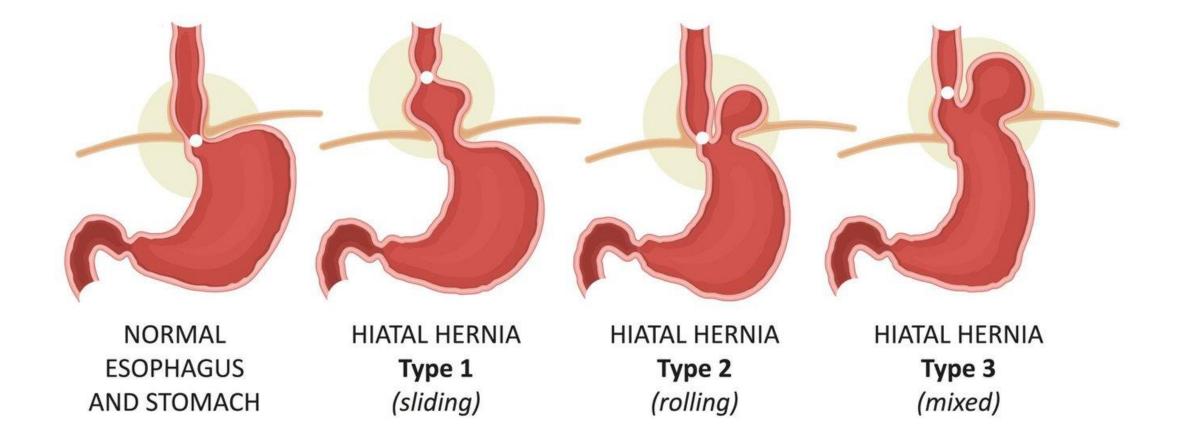
5-8% Urostomy [Rubin & Bailey1993]



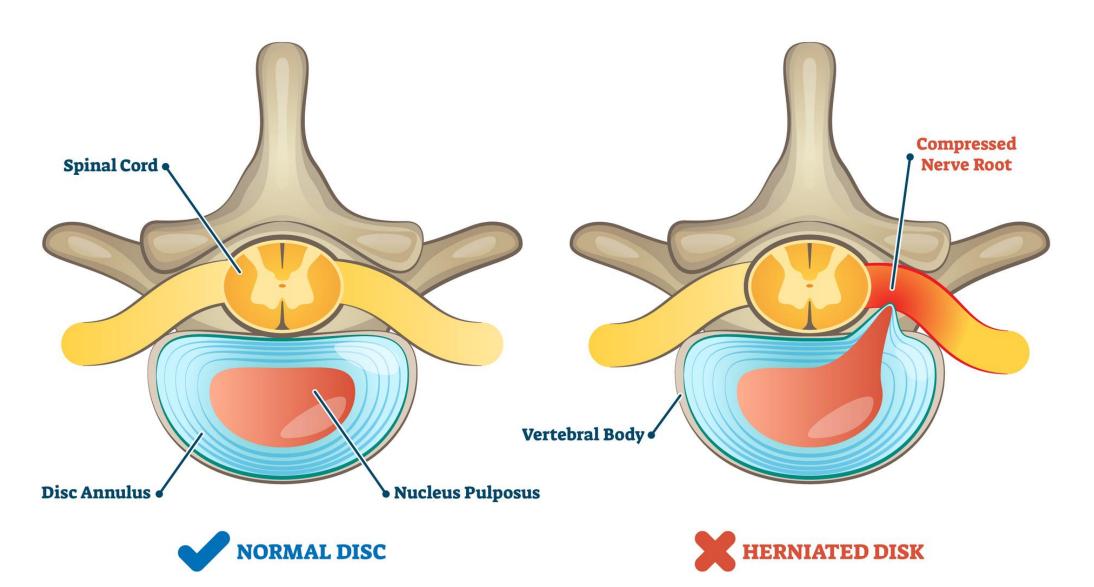
Hiatal Hernia

- A hiatal hernia occurs when the top of your <u>stomach</u> pushes up through an opening in your <u>diaphragm</u> into your chest. Your diaphragm is the muscle barrier that separates your abdominal cavity from your <u>chest cavity</u>. Hiatal hernias are among the most common types of hernias.
- Hiatal hernias push through a preexisting weakness in your diaphragm — the opening where your <u>esophagus</u> passes through to connect to your stomach. Healthcare providers call this opening the esophageal hiatus, which is where the term, hiatal hernia, or hiatus hernia, comes from. Stress and strain can widen this opening over time. This condition usually develops slowly over many years.

TYPES OF HIATAL HERNIA

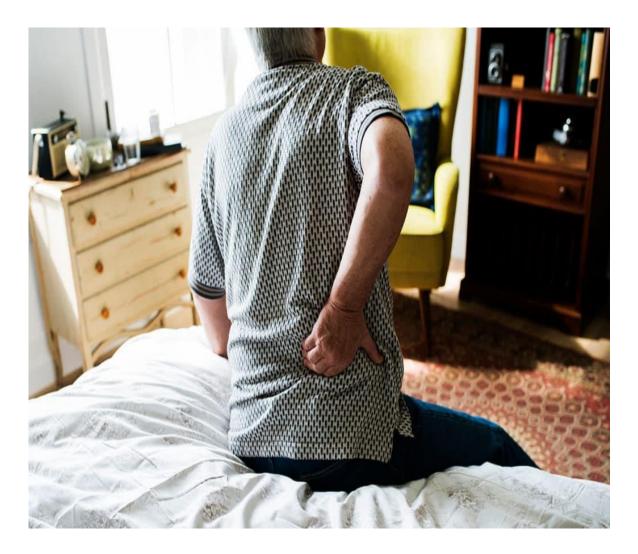


HERNIATED DISC



Symptoms of Herniated Disc May Vary

- Symptoms vary based on location within the spinal vertebrae
- No symptoms to multiple symptoms-- i.e., numbness, tingling, difficulty moving, difficulty walking
- Pain may be moderate to severe

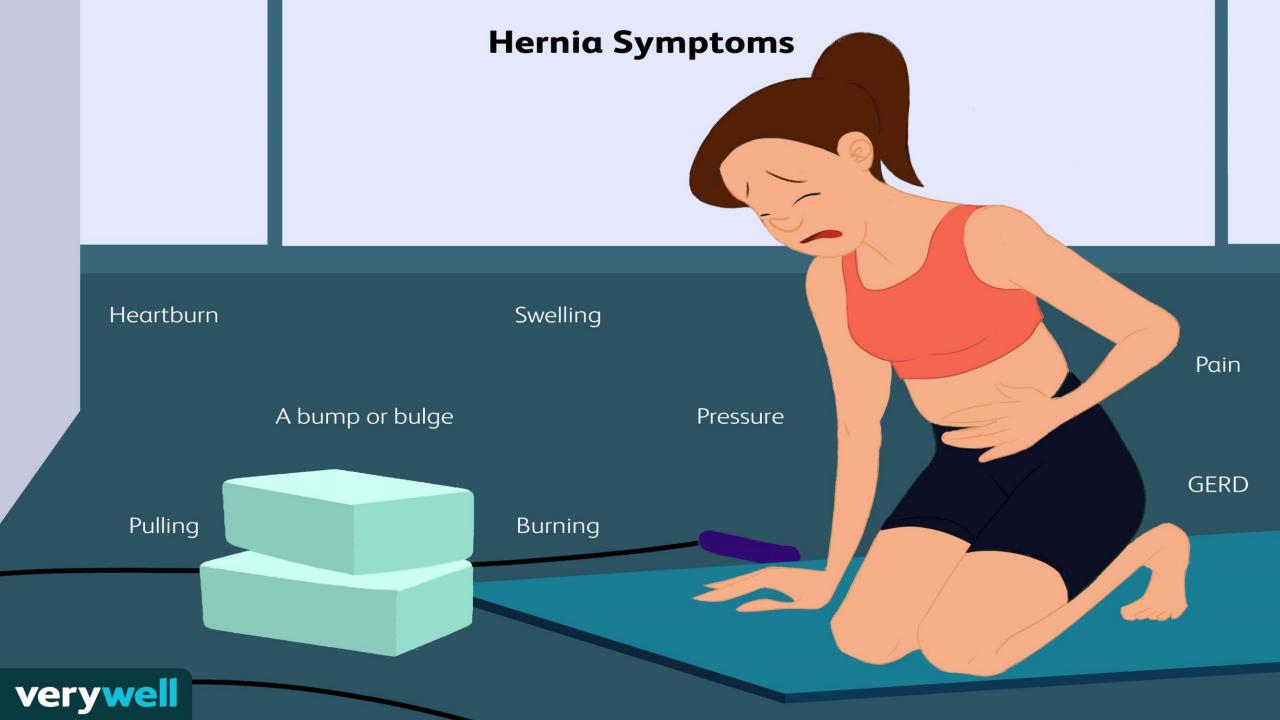


TRADITIONAL HERNIATED DISC TREATMENT

If you're experiencing back pain, or any of the symptoms describing a herniated disc, your doctor may perform a physical and neurological exam to check your reflexes, muscle strength, range of motion, and pain levels. If you've suffered from a back injury or have been experiencing chronic lower back pain, imaging tests may be used to find and diagnose the possible causes.

TRADITIONAL HERNIATED DISC TREATMENT

Conservative treatment is usually the first and best option for a bulging disc. Your doctor will likely suggest rest from physical activity, physical therapy, massage, and medications, such as NSAIDS or muscle relaxers, to treat your symptoms. For more severe and painful disc injuries, you may need steroid injections, ultrasound therapy, and surgery to help alleviate symptoms.



HERNIA TREATMENTS

- Parastomal, abdominal, inguinal and spinal disc hernia--support belts
- Over the counter medications for hiatal hernia--acid reducers, i.e., omeprazole (Priolsec, Zegerid), proton pump inhibitors (Prilosec, Zegerid), lansoprazole (Prevacid 24H) and esomeprazole (Nexium) may stop your cough if you have acid reflux due to a hiatal hernia. Acid reducers, i.e., Gaviscon, Tums, Rolaids.
- Prescription medications for hiatal hernia--Stronger versions of the above.

HERNIA TREATMENTS

- Herbal remedies—advertised for abdominal hernias--HerniCare, Harthornia by MagiHerbs Hernia Remedy
- Medications for herniated disc—NSAID (i.e. Advil/Motrin/Ibuprofen, Tylenol/Acetaminifen, Naproxen/Naprosyn/Aleve, as well as prescription meds, (i.e., Indocin, Torodol, Celebrex), steroids (Prednisone)
- Exercises for herniated disc—as directed by physician / physical therapist
- Surgery—for multiple types of hernias--laparoscopic, robotic assisted, open

SUPPORT BELTS

Abdominal hernia



Inguinal hernia



Parastomal hernia



Herniated, degenerative or bulging spinal disc



SPECIAL NOTE REGARDING PARASTOMAL HERNIA SURGERY

- Surgeons will usually <u>not</u> do parastomal hernia repair surgery for cosmetic reasons alone.
- Reasons for parastomal hernia repair:
 - Ostomy is not discharging
 - Severe pain

<u>Reasons for not doing surgery</u>-surgery may not correct the problem. Weak abdominal muscle are made weaker with each abdominal surgery. Age is a factor as well. Parastomal hernias are often present in long term ostomies, so advanced age of the ostomate is considered a risk factor.

Best Advice to AVOID development of a parastomal hernia:

- **1. Avoid heavy lifting over 25 pounds**
- 2. If you must do heavy lifting, wear a hernia support belt.



June is Hernia Awareness Month. If you are concerned about a hernia, please consult your health care provider.