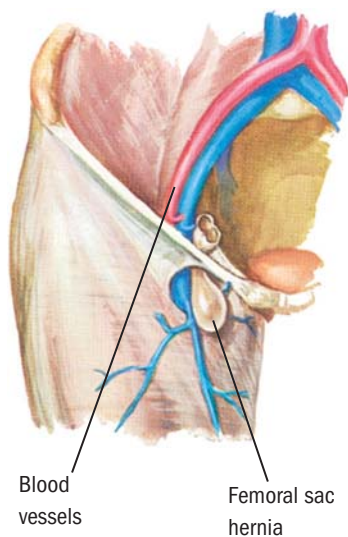
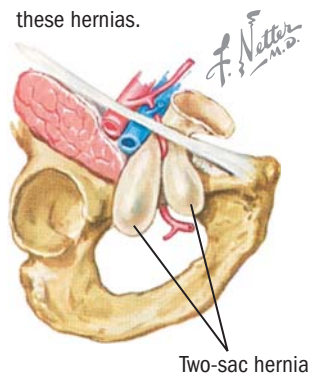


# MANAGING YOUR FEMORAL HERNIA



A femoral hernia is a bulge of intestine or fatty tissue pushing through a weak muscle in the groin. It occurs near the thigh, usually on the right side. More women than men tend to have these hernias.



## Contributing factors:



Your doctor will make a diagnosis by examining you.

## What Are Femoral Hernias?

A femoral hernia is a bulge of intestine (bowel) or fatty tissue pushing through a weak muscle in the groin. It occurs near the thigh, usually on the right side. More women than men tend to have them. It can't be entirely prevented.

## What Causes Femoral Hernias?

Contributing factors include being overweight, pregnancy, coughing a lot, constipation, straining to have a bowel movement (stool), and heavy lifting. Getting older, smoking, being born prematurely or having a low birth weight, illness, and using steroid medicines tend to increase chances of having a femoral hernia.

## What Are the Symptoms of Femoral Hernias?

Very small hernias may cause no symptoms. The main symptom is a bulge in the groin. It gets bigger on standing and smaller when lying down. It may cause an aching pain that might be felt in the inner part of the thigh.

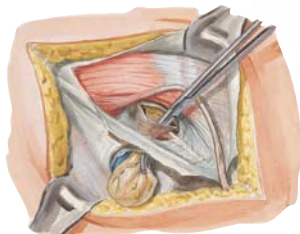
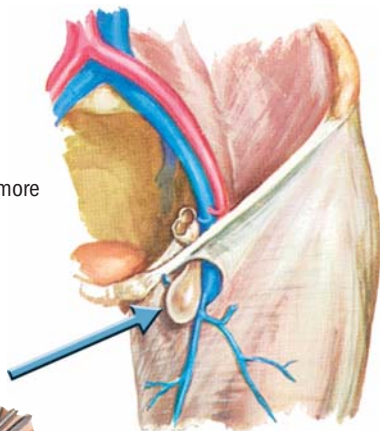
A bulge that gets bigger and starts to hurt more can mean an incarcerated or strangulated hernia. With an incarcerated hernia, bowel or fat became stuck in the hernia. With a strangulated hernia, blood flow is blocked. Other symptoms of incarcerated or strangulated hernias include nausea, vomiting, and severe constipation. Also, the hernia won't get smaller when lying down.

## How Are Femoral Hernias Diagnosed?

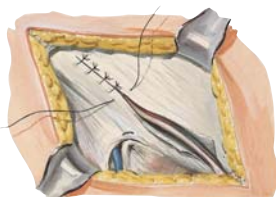
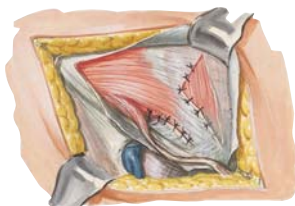
The doctor will make a diagnosis by doing a physical examination. If surgery is suggested, blood and urine tests, electrocardiography (ECG) (a record of the heart's electrical activity), and chest x-ray may be done before the surgery.

## MANAGING YOUR FEMORAL HERNIA

Your doctor will try to push the hernia back, to prevent more serious hernia incarceration or strangulation.



Femoral hernias can be fixed by outpatient surgery. Your surgeon may fix it through a small cut in the skin (laparoscopy).



Eat a high-fiber diet and drink eight glasses of water a day to prevent constipation and straining to have a bowel movement.



Keep your weight down and follow safety instructions about lifting heavy objects.

### How Are Femoral Hernias Treated?

First, the doctor will try to push the hernia back, to prevent incarceration and strangulation.

However, femoral hernias can be fixed by outpatient surgery. The operation used depends on the hernia size and general health. The surgeon may fix it through a small cut in the skin (laparoscopy). The surgeon repairs the hernia by using a lighted tube that is put through a very small hole in the skin. A mesh material may be put over the hernia to add strength, so that the hernia won't occur again.

The doctor will prescribe pain pills and may suggest using a mild laxative to avoid straining when moving the bowels. After surgery, sudden and severe twisting and turning and driving a car should be avoided to prevent loosening the stitches or incision.

### DOs and DON'Ts in Managing Femoral Hernias:

- ✓ **DO** follow your doctors instructions about taking pain pills, returning to work, and resuming sex after surgery.
- ✓ **DO** eat a high-fiber diet and drink eight glasses of water a day to prevent constipation and straining to have a bowel movement.
- ✓ **DO** call your surgeon if the incision gets red or swells or fluid seeps from it. Also call your surgeon if your temperature gets higher than 100° F.
- ✓ **DO** reduce your chance of getting femoral hernias by keeping your weight down, eating a high-fiber diet, drinking enough water, and following safety instructions about lifting heavy objects.
- ⊗ **DON'T** forget follow-up appointments.
- ⊗ **DON'T** lift heavy objects or drive until your surgeon says you can.

#### FROM THE DESK OF

#### NOTES

#### FOR MORE INFORMATION

##### Contact the following sources:

- American Gastroenterological Association  
Tel: (301) 654-2055  
**Website: <http://www.gastro.org>**
- Society for Surgery of the Alimentary Tract  
Tel: (978) 526-8330  
**Website: <http://www.ssat.com>**