

William J. Plaus, M.D., F.A.C.S.
Robert M. Macdonald, M.D., F.A.C.S.
Scott M. Golembeski, M.D.
Lisa S. Schatz, M.D., F.A.C.S.

General, Thoracic
Vascular, Cancer
Advanced Laparoscopic

Rocky Mountain Surgical Associates, P.C.

4545 East Ninth Avenue
Suite 460
DENVER, COLORADO 80220
Phone: (303) 388-2922
FAX: (303) 388-2962

Types of Hernias



Groin hernias (frequently referred to as **inguinal** or **femoral** hernias) are more common in men than women and result from weakening of the tissue in the groin due to stress or aging. Many groin hernias have been present since birth, but only become noticeable with age. As the abdominal wall weakens, a **hole** develops which lets organs in the abdomen protrude through. This can be perceived as pain or seen as a **bulge**. The pain may be in the scrotal or labial area, and occasionally goes down the front of the thigh. The bulge may come and go, and discomfort can be intermittent. Hernias can be dangerous if the intestine drops through the hole and becomes obstructed. It is not uncommon to have hernias on **both sides** at presentation.

Epigastric hernia: This hernia is seen as a small bulge in the midline, between the navel and breastbone. It is usually composed of fatty tissue and is often painless when first discovered. It is not uncommon to have more than one hernia in the midline, as this hernia tends to represent a general weakness of the middle of the abdominal wall.

Incisional hernias: can occur wherever a previous surgical incision has been made. It results from incomplete healing of the incision and can occur immediately after surgery, or many years later. All surgical incisions are at risk for hernia formation.

Umbilical hernia: This is a common type of hernia usually appearing as a protrusion at the bellybutton. Patients are at increased risk for umbilical hernia formation if they do heavy lifting, are overweight, or have been pregnant.