Hernia Repair

(Herniorrhaphy)

For an appointment call

1-888-UCH-0200

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hernia is a bulging of abdominal contents (bowel or other structures) through a weakened area in the abdominal wall. The hernia may sometimes have a

decreased blood flow that necessitates immediate surgery. Other hernias may be temporarily reduced by a physician who pushes the abdominal contents back in. With strain on the area, the hernia may recur.

Causes and Treatment Options

Approximately 80 percent of all hernias are located near the groin, but can also be found below the groin, through the navel, and along a previous incision. Hernias are usually caused by a natural weakening of the abdominal muscles that comes with age. In many cases, however, the opening becomes wider as the result of strain, either from improper lifting, or even from coughing. The strain can cause the muscle layer to give away suddenly, so that every time you strain or lift something, the abdominal contents push out through the opening, making it even larger.

Surgery is the only way to repair a hernia. Patients can choose either traditional open surgery or a minimally invasive surgical procedure. With traditional hernia repair, a three- to five-inch incision is made, the hernia is repaired,

and the opening is sewn shut.

Minimally Invasive Surgery Used to Repair Hernias

Surgeons perform the laparoscopic procedure through three tiny incisions, each about a quarter-inch long. A surgical instrument called a laparoscope is inserted through the incisions. A video camera at the end of the laparoscope allows the surgeon to see a magnified view of the patient's internal organs on a video monitor. The surgeon then manipulates surgical instruments, brought to the operative site through small, hollow tubes, and pulls the hernia sac back into the abdominal cavity. The defect in the abdominal wall is covered with a mesh patch that is

rience minimal pain, and can resume normal activities after a week.

Surgeons with the University of Chicago Hospitals Minimally Invasive Surgery Center routinely per-

home the same day or one day after surgery, expe-

anchored securely to the abdominal wall. Since

the incisions are so small, patients typically go

Minimally Invasive Surgery Center routinely perform laparoscopic hernia repair surgeries. In fact, Constantine Frantzides, MD, Director of the Minimally Invasive Surgery Center, performed the first in the world laparoscopic ventral hernia repair with a Gortex-prolene mesh.

The Minimally Invasive Surgery Center

The University of Chicago Hospitals Minimally Invasive Surgery Center at Louis A. Weiss Memorial Hospital is at the forefront of laparoscopic surgery. Surgeons here are pioneers in advancing minimally invasive diagnostic and therapeutic surgical procedures, many of which are now performed all over the world. For example, Dr. Frantzides was the first in the world to pioneer eight different new laparoscopic procedures.

Specialists from general surgery, obstetrics and gynecology, urology, ophthalmology, orthopaedics, plastics, and thoracic and vascular surgery all work together to offer a full spectrum of minimally

invasive surgeries from gallbladder and hernia procedures to surgery of the spine, spleen, stomach, colon, and other organs. These specialists also collaborate to advance the use of laparoscopic technology to other procedures that currently require traditional open surgery.

For a consultation or second opinion with one of our minimally invasive surgical specialists, contact your primary care physician or call toll-free 1-888-UCH-0200.



Laparoscopic, or minimally invasive, surgery to repair hernias offers many benefits over traditional open surgery, such as:

- Only a few small marks as opposed to a three- to five-inch scar.
- Reduced pain and quicker recovery.
- Return to normal activities in as little as two days.
- Safe and effective treatment of hernias.

