

Umbilical Hernia Repair

Your child has been referred for an umbilical hernia repair. This leaflet explains the procedure and aims to answer the main questions you're likely to have. If you have any additional questions please feel free to discuss them with your child's doctor or nurse before the procedure.

What is an umbilical hernia repair?

An umbilical hernia is when the belly button pops outwards due to a weakness in the muscles in or around the belly button. The aim of a hernia repair operation is to push the contents of the bulge back into the abdomen (tummy) and strengthen the abdominal wall.

Preparing for your child's operation

If your child has a cold or infection in the week before the operation, please let us know. The operation may need to be postponed until your child has fully recovered.

Umbilical hernia repair is usually done as a day-case procedure under general anaesthesia. This means your child will be asleep during the procedure. It also means he or she must not eat anything or drink milk for about six hours beforehand. Your child can drink water until two hours before the procedure.

When you arrive at the hospital, a nurse will measure your child's heart rate and blood pressure and ask you questions about his or her general health. You must tell the nurse if your child has any allergies or if there is any history of bleeding problems in the family. The surgeon and anaesthetist will also visit your child before the operation.

You will be asked to sign the consent form if you have parental responsibility for the child. People with parental responsibility are usually, but not invariably, the child's birth parents. Your child may wish to sign this form too. In some circumstances a child can sign their own consent form independently, providing he or she understands what they are being asked to do.

About the procedure

A small cut is made just above or below the belly button, and the bulge is pushed back into place. Strong stitches are used over the weak spot to strengthen the wall of the abdomen. The skin cut is closed with dissolvable stitches and covered with a dressing.

Your child may be given a local anaesthetic before he or she wakes up, either by injection or by gel applied to the area. This means that he or she will feel less pain immediately after the operation.

What to expect afterwards

Your child will be monitored for a short while and then brought back to the ward to recover. He or she may be sleepy, and feel or be sick. It's possible that your child will be upset after

the procedure. He or she will need to rest until the effects of the general anaesthetic have passed. Your child should be able to eat and drink soon after the operation. Once your child is comfortable and eating and drinking, he or she will be able to go home. This is likely to be around three to four hours after the operation.

The surgeon may prescribe antibiotics for a few days, although this is very rare. If your child is prescribed antibiotics, it's important that he or she finishes the course.

Recovering from an umbilical hernia repair

Pain relief

You should give your child pain relief regularly for the first 24 to 48 hours. Paracetamol or ibuprofen syrup (for example, Calpol or Calprofen) are suitable. Follow the instructions on the leaflet that comes with the medicine and ask your pharmacist for advice. Do not give aspirin to children under the age of 16.

Stitches

Your child's stitches are dissolvable and will disappear within two to three weeks.

Dressing

Your child will probably have a pressure dressing. This can be removed in the bath after three days (if it hasn't come off before then).

Bathing

The area should be kept dry for 48 hours after the operation - so don't give your child a shower or bath for the first two days. After this, he or she can have a warm bath once or twice a day, without adding bubble bath or scented soaps. These may irritate the healing wound. When you do bathe him or her, the dressing may come off. This is normal and it doesn't need to be replaced.

Clothing

Your child should wear loose clothing until the wound is fully healed.

Your child may need to take a few days off school and shouldn't ride a bike or swim for at least two weeks.

Follow-up

Your child will be seen again in the outpatient department, generally four to six weeks after the operation. This will be arranged by your nurse or the consultant's secretary.

What are the risks?

Umbilical hernia repair is commonly performed and generally safe. However, in order to make an informed decision and give your consent, you need to be aware of the possible side-effects and the risk of complications of this procedure.

Side-effects

These are the unwanted, but mostly temporary effects of a successful procedure, for example feeling sick as a result of the general anaesthetic. Your child will have some pain, bruising and minor swelling in the lower abdomen for a week or two.

Complications

This is when problems occur during or after the operation. Most children are not affected. The possible complications of any operation include an unexpected reaction to the anaesthetic, excessive bleeding or infection. Complications may require further treatment such as returning to theatre to stop bleeding, or antibiotics to deal with an infection.

There's a chance the umbilical hernia may re-occur.

What to look out for

Contact Starfish Ward for advice if your child:

- your child complains of severe pain or shows signs of worsening pain - young children cry more when they are in pain and are difficult to settle
- your child develops a temperature
- the wound is red, swollen, bleeding or starts to weep a discharge

Contact

With these, or any other concerns, contact Starfish Ward directly on +44 (0)20 7460 5991 and you will be able to speak to a paediatric nurse or a doctor.

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