

Everyone is at risk for a hernia

More than 600,000 hernia repair surgeries are performed in the United States annually, and everyone is at risk. Adults and children alike can develop hernias as a result of heavy lifting, straining, coughing, or any unusual stress that causes a sudden increase of intra-abdominal pressure. Some hernias are congenital, or present at birth, whereas others develop as a result of a predisposition for hernia, and anyone who has surgery may experience a weakening of tissue at the incision site that could result in a hernia.

Because we are all at risk, *Florida Health Care News* turns to a specialist in minimally invasive surgery, David A. Napoliello, MD, to learn more about hernia repair. Dr. Napoliello of Lakewood Ranch Minimally Invasive Surgery is board certified by the American Board of Surgery and is a fellow of the American College of Surgeons.

FAQs

According to Dr. Napoliello, a hernia is a defect of the abdominal wall that allows a protrusion of an organ or structure through the wall that normally contains it.

Dr. Napoliello, what is the most common type of hernia?

The most common type of hernia is called an *inguinal* hernia. It is a defect or weakness in the abdominal muscle wall through which intestine and fat layers protrude, forming a visible

How does a person know when he or she has a hernia?

A person may suspect a hernia if he or she notices a bulge under the skin. Additional symptoms may include discomfort or pain during any of the following: lifting heavy objects, sneezing or coughing, straining while using the toilet, or standing or sitting for long periods of time. Because delayed treatment can sometimes result in the intestine being trapped inside the hernia sac, resulting in gangrene, any bulge should be



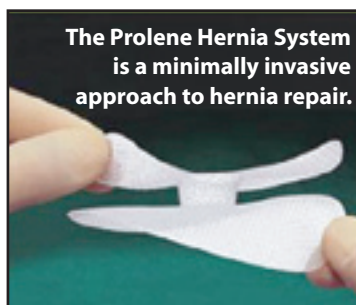
Hernias can develop as a result of heavy lifting and straining.

SOURCE: ISTOCKPHOTO.COM

following surgery.

Today, we can offer a variety of both minimally invasive open procedures and laparoscopic procedures.

Please describe the minimally invasive open procedures. Unlike the tension repair, minimally invasive open procedures are tension free, because the stitches or sutures used do not put tension on the sides of the defect to keep it closed. Instead, special mesh patches are used that limit the size of the required incision. These procedures offer lower recurring rates,



SOURCE: HERNIASOLUTIONS.COM

quick recovery, and only minor discomfort following the surgery. Additionally, the minimally invasive approach allows the patient to avoid general anesthesia. It is usually performed in under an hour and is done on an outpatient basis.

How do the laparoscopic surgeries differ? There are two main options for laparoscopic surgery. In the *transabdominal* approach, the physician makes a small incision and slides the laparoscope, which is a thin telescope, through the abdominal wall into the abdomen. For the *preperitoneal* approach, the laparoscope

slides in between the tissues of the abdominal wall. With both approaches, the doctor views the hernia and surrounding tissue on a video screen.

What are the advantages of laparoscopic surgery?

Depending on the patient, of course, there are several. Because it requires only small incisions, it will likely mean less pain and a shorter recovery time for patients, and because the physician has the advantage of looking through the telescope, previously undiagnosed hernias may be discovered. Additionally, the laparoscopic approach allows us to manage recurrent hernias and to optimize any repeat surgery because we do not have to go through the same incision site.

Is this surgery done on an outpatient basis? Yes, and it is usually performed in under an hour as well.

Do you have a preference between the minimally invasive open procedure and the laparoscopic procedure?

It depends on the patient. I specialize in minimally invasive surgery techniques and did my fellowship in minimally invasive and advanced laparoscopic surgery. In fact, I was involved in training

surgeons using the laparoscopic approach when it was first developed.

When my patients are good candidates for either one, I provide them with information on both the minimally invasive open procedures and the laparoscopic procedures, and we make the decision together as to which one will be more appropriate.

Once the surgery has healed, will the patient experience any diminished quality of life?

No, most patients will be able to return to a normal routine. In fact, data show that within a week's time, most people will feel well. Because I am conservative, I recommend that my patients avoid any physical strain for four weeks.

FHCN

This interview with Dr. Napoliello was conducted by Kris Kline, a staff writer at Florida Health Care News.

Learn more

The staff of Lakewood Ranch Minimally Invasive Surgery look forward to answering your questions. For additional information or to schedule an appointment, please call (941) 388-9525 for the location at Medical Office Building 1, 8340 Lakewood Ranch Blvd., Suite 101, in Bradenton or at Venice Health Park Specialty Suites, 1201 Jacaranda Blvd., in Venice.



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Lakewood Ranch Minimally Invasive Surgery

David N. Napoliello, MD, FACS

bulge in the groin area.

To visualize the dynamics of it, think of an automobile tire. The abdominal wall is like the thick outer wall of the tire. Should the tire get damaged, the inner tube can push through the weakened area or crack and form a small bubble. If the abdominal wall becomes weakened, the thinner, flexible tissue that lines the inside of the abdomen and holds the intestines in place, called the *peritoneum*, can bulge into the outer wall. In the tire, it is easy to see that the inner tube can become strangled by the pressure of the edges of the crack through which it is protruding. It is the same with a hernia.

What are some of the other common types of hernias? An *umbilical* hernia takes place when abdominal contents protrude through the naturally occurring tiny opening behind the belly button. *Incisional* hernias can take place when a previous surgery leaves an abdominal wall defect that allows the abdominal content to protrude through it and bulge out.

brought to a physician's attention immediately so diagnosis and treatment can begin. If left untreated, some complications from hernias can be fatal.

Will a small hernia ever heal itself?

No, a hernia does not heal itself or improve over time without intervention. The only exception to this may be small umbilical hernias in young children.

What treatments are available for hernias? Surgeons may choose one of several hernia repair techniques today, depending on the patient and the size of the hernia.

In the past, the only hernia repair option available was called a *tension* repair. In this open surgical procedure, the physician makes an incision at the site, pushes the protruding tissue back into place, and stitches the tissue layers together. The potential disadvantages of this type of surgery are relatively long recovery periods, relatively high recurring rates, and discomfort