Information on Pediatric Surgery

Hernia and <mark>Hydocele</mark>

The cause of hernia and hydrocele is the pathway between the abdominal cavity and groin, formed during fetal development, remaining open: when the opening is small, the fluid in the abdominal cavity may enter the scrotum and develop hydrocele; if the opening is large, the intestines in the abdominal cavity may fall into the groin area and develop hernia.

Reasons for Surgery

- 1. Congenital hernia sac remains open
- 2. The abdominal organs (such as large intestine, small intestines, mesentery, ovary, oviduct, etc) are likely to descend into scrotum and cause incarcerated hernia
- 3. An incarcerated hernia requires urgent treatment; otherwise it may lead to testis necrosis, ovary necrosis, or intestine necrosis.
- 4. Bilateral hernia is quite uncommon (about 5-6%); if necessary, the bilateral hernia repair will be done during the surgery.



Hernia

Scrotal Edema

Surgical Success Rate

- 1. More than 99.9 %
- 2. Recurrence rate: 0.1%

Complications after Surgery

- 1. Complications from anesthesia: sore and swollen throat, hoarseness, restlessness during recovery stage
- 2. Scrotum swelling, pain, mild fever, wound infection in some serious cases; it takes 1-2 weeks to recover

Wound Care after Surgery

- 1. No need to change dressings or take out stitches; keep wound dry for 6 days, sponge bath recommended.
- 2. Do not remove the adhesive tape on the wound by yourself; remove it when you come to see the doctor in one week.
- 3. A little bleeding on the wound surface is all right
- 4. If the wound appears red, swollen, tender, and secretes some fluid, please return to the hospital for examination.

Outpatient Service of the Department of Pediatric Surgery National Cheng Kung University Hospital