

South Central Priorities Committees
(Southampton, Hampshire, Isle of Wight and Portsmouth PCTs)

Policy Recommendation 148: Repair of asymptomatic inguinal hernias in adults

Date of issue: February 2013

The South Central Priorities Committee (Southampton, Hampshire, Isle of Wight and Portsmouth) has considered the evidence for the repair of asymptomatic inguinal hernias in adults. Because of a lack of evidence of benefit, NHS funding of the repair of asymptomatic inguinal hernias in adults is LOW PRIORITY.

Patients should only be referred for consideration of surgery if they meet at least one of the following criteria:

- 1. History of incarceration of, or real difficulty in reducing, the hernia**
- 2. An inguino-scrotal hernia**
- 3. An increase in size**
- 4. Pain or discomfort significantly interfering with activities of daily living**
- 5. Specific problems with work or activities of daily living because of the hernia.**

Funding of hernia repair in those with symptoms, in children and in people with other types of hernia is not affected by this decision.

A hernia occurs when an internal part of the body, such as an abdominal organ, passes through a weakness in the surrounding tissue wall. Inguinal hernias are common and sometimes asymptomatic. Hernias can be repaired surgically, but this carries risks, including chronic pain.

Two randomised trials report that repairing an asymptomatic or minimally symptomatic inguinal hernia has no detectable effect on the risk of pain occurring in the medium term. The risks of complications from non-operative management were very low.

The operation appears unlikely to be cost effective at a threshold of £30,000 per QALY.

NOTES:

- 1. Exceptional circumstances may be considered where there is evidence of significant health impairment and there is also evidence of the intervention improving health status.*
- 2. This recommendation will be reviewed in the light of new evidence or guidance from NICE.*
- 3. South Central recommendations can be viewed at <http://www.sph.nhs.uk/ebc/policy-recommendations/mobbb-policies>*