Primary abdominal wall hernias, including groin hernias

A guide to ACC cover

This document provides guidance on when ACC is likely to cover an abdominal wall hernia as an injury caused by an accident. It reflects the consensus view of the Expert Advisory Group representing ACC and the Royal Australasian College of Surgeons.

<table>
<thead>
<tr>
<th>Type of hernia</th>
<th>Consensus statement</th>
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<tbody>
<tr>
<td>Inguinal hernia</td>
<td>An inguinal hernia is the most common type of groin hernia.                                                                                                           In considering cover for an inguinal hernia the following factors must be present:                                                                                   • The patient reports that a single strenuous event has caused the hernia.                                                                                              • The event involves the application of an unusual, sudden, unexpected force as opposed to a controlled movement.                                                                                   • The patient suffered significant groin pain at the time of the event, and the pain was substantial enough to cause the patient to cease activity at that time or soon afterwards.</td>
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<td>In addition, the following factors would be expected:                                                                                                                       • A medical or nurse practitioner’s record of the physical examination includes localised groin tenderness and a demonstrable lump in the groin that was not there previously.                                                                                       • The hernia diagnosis is made within 10 days of the event. If not made within 10 days there must be a reasonable explanation for the delay.                                                                                       • There is no prior or current history of a non-traumatic inguinal hernia on the same side.                                                                                       • If the event occurred in a workplace, the incident has been officially reported.</td>
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<tr>
<td>Traumatic abdominal wall hernia*</td>
<td>Hernias that are the result of a direct blow to the abdominal wall involving extreme force and a traumatic rupture are rare in clinical practice. Typically, these hernias are associated with handlebar or lap seatbelt injuries, or crushing of the abdomen. The abdominal wall hernia occurs at the site of the impact. ACC is likely to cover these if contemporaneous hospital or medical records confirm tissue disruption and a fascial defect is a direct consequence of the trauma.</td>
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<tr>
<td>Femoral hernia*</td>
<td>It is unlikely that any of these types of hernia is caused by a single strenuous event.                                                                                                                                  The available evidence indicates that normally these hernias develop slowly as a result of weakening of tissues in the abdominal wall, or through fascial defects, and then become obvious in some people.</td>
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<tr>
<td>Epigastric hernia*</td>
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<tr>
<td>Umbilical or para-umbilical hernia*</td>
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<tr>
<td>Spigelian hernia*</td>
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</tbody>
</table>


* Please note that the criteria used for assessing cover for inguinal hernia are not applicable to this type of hernia

1. Treatment injury – a hernia caused by treatment (e incisional hernia) is considered separately.
Key points:

- The prevalence of an abdominal wall hernia in the general population is difficult to estimate because the hernia is often asymptomatic.
- The aetiology and pathogenesis of abdominal wall hernias are multifactorial and complex.
- In general, stretching or twisting movement is unlikely to cause a hernia.
- In many instances, a bulge protrudes through an existing abdominal wall defect that enlarges with time. Such hernias are not caused by a single strenuous event but simply become apparent or increase in size after an event, such as lifting.
- Ultrasonography is not indicated when a hernia is clinically obvious.
- ACC can cover an abdominal wall hernia if it is established that the hernia is a result of an accident (such as direct trauma to the abdominal wall).
- ACC does not cover hernias that are caused wholly or substantially by disease or ageing.

Guide development

This guide was developed by the Expert Advisory Group from ACC and the Royal Australasian College of Surgeons (RACS).

The Expert Advisory Group:

- reviewed scientific literature published between 2001 and 2018
- noted the lack of research evidence related to hernia causation from a single strenuous event
- considered the existing approach to cover for inguinal hernias
- confirmed that the cover criteria for inguinal hernias are not applicable to other types of abdominal wall hernia
- provided additional advice on the events and pain experienced when an inguinal hernia is caused by a single strenuous event.

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