Other Hernia Types

While inguinal hernia is the most common, there are a number of different types of hernia that involve protrusion of the bowel through abdominal defects other than the inguinal canal. These include the following:

**Femoral**: These hernias occur through the femoral canal inferior to the inguinal ligament. They have a relatively high tendency to strangulate and are more common in women and with increased age.

**Obturator**: These hernias are extremely rare and occur through the pelvic obturator canal (made up of the superior pubic ramus and the obturator fascia). They have increased occurrence in women and with increased age and are associated with high rates of strangulation.

**Spigelian**: The semilunar line (where the posterior rectus sheath ends about 3–4 cm below the umbilicus) can occasionally be the site of an abdominal wall defect. Hernias can occur through these rare defects and present as a mass along the lateral border of the rectus abdominis.

**Umbilical**: These hernias occur when the umbilical scar fails to heal at birth. They usually occur in infancy and are more common in females than in males. They usually close spontaneously by the age of 5.

**Epigastric**: These hernias occur along the midline between the umbilicus and the xyphoid process. They usually occur through small defects and are frequently incarcerated. They are more common in males and usually present in middle life.

**Incisional**: Abdominal contents can herniate through fascial defects in surgical incisions, giving rise to incisional hernia. These can occur at any location on the abdominal wall there is an incision, although they are most common in large incisions in patients with impaired wound healing (due to factors such as wound infection, diabetes, smoking, obesity, etc.).