



An Institutional Experience on Complicated Groin Hernias

KEYWORDS

Complicated groin hernia, intestinal obstruction

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ABSTRACT

Background :Emergency repair of complicated hernias is associated with poor prognosis and a high rate of post-operative complications and pose a threat to the life of the patient. The aim of this study was to determine the presentation, treatment and management outcome of complicated inguinal hernias in our set up. **Methods :**The study was carried out among 40 patients admitted in the Department of General Surgery Patients with complicated presentation of groin hernia to like irreducibility, strangulation, and obstruction were enrolled into the study after proper consent for examination and subsequent treatment. The duration of the study was from November 2013 to April 2015. Data obtained included demographic characteristics, presentation, operative findings and outcome. **Conclusions** From the present study it is evident that most patients of complicated groin hernias present with painful irreducible swellings if not taken care of, then of course progress to obstruction and strangulation.

Introduction

Groin hernias are the most common type of hernia and account for 75% of all abdominal wall hernia². Inguinal hernias account for 95% of these and femoral hernia the rest². With the recent advances, the treatment of these hernias is very simple and is almost treated as a daycare procedure at most centers. In spite of the ease with which a hernia can be repaired on an elective basis, patients present with complicated presentations that is associated with considerable morbidity and mortality. A simple groin hernia can result in complications because of the neglect of the patient. In this study we focused the attention on the assessment of the various clinical presentation, Management and outcome of complicated groin hernia

Materials and Methods

Patients with complicated presentation of groin hernia like irreducibility, strangulation, and obstruction were enrolled into the study after proper consent for examination and subsequent treatment. The duration of the study was from November 2013 to April 2015. The method of collection of data was by meticulous history, careful examination, appropriate radiological investigation, operative findings and follow up. **Inclusion criteria:** Patients presenting with complicated inguinal hernia and femoral hernia. **Exclusion criteria:** Patients admitted with irreducible hernia that reduced spontaneously on admission. The patients were followed up for the following, Immediately infection, bleeding, pain, seroma, scrotal edema, ischemic orchitis, testicular atrophy, paraesthesia, and anastomotic leak. Late for recurrent hernia, obstruction, and chronic groin pain. Follow up interval - Once a week for 1 months, once every month for the next 6 months. After data collection, analysis was done with help of SPSS software version 20 was presented with the help of frequency and percentage.

Results And Observations

The study was a prospective clinical study conducted at the department of surgery at medical college. The most common age group involved is the 41-50 years age group with 17 cases (42.5%). The mean age in our study was 47.05 years. Standard deviation of age is 12.15 years. In our study, the most common gender involved in groin hernias was male with 38 cases (95%) of the cases, most com-

mon presenting complaints was irreducible swelling in the groin and pain in the swelling in 40 patients (100 %)., most common predisposing factor was BPH, followed by bronchial asthma in 3 cases, chronic bronchitis in 2 cases and pulmonary tuberculosis in 1 case. 40 cases, 24 were smokers, and all smokers were males presented within 5 years of history of groin swelling. Hernioplasty was the most common surgical procedure that was performed in our 18 cases the rest underwent herniorrhaphy.

Discussion

The mean age in our study was 47.05 years, in various studies of groin hernias the mean age was as follows Leigh Neumayer⁴ 58 years, Akinkuolie⁵ 47.7 year, Junior Sundresh⁶ 53.25 years. In our study the most common side involved was the right side in 24 cases, 60% of the individuals similar to study by Junior Sundresh⁶ Right side involvement was 46 cases, 76%. The most common gender involved in groin hernias was male with 38 cases 95% of the cases similar findings were noted in various studies of groin hernias V. Ravikumar⁷ 15:1, Grosfeld⁸ 9:1, Junior Sundresh⁶ 47:3. Hernioplasty was the most common surgical procedure. Post-operative recovery was uneventful in 29 cases, wound infection was seen in 4 cases, post op fever was seen in 2 cases, post op unbearable pain was seen in 5 cases. Post-operative complications as per the study by Junior Sundresh⁶ No complication was seen in 30 cases (50 %) seroma in 18 cases (10 %), wound gaping in 4 cases (6 %), hematoma in 3 cases (4%). Recent onset tenderness in the groin swelling was the most common symptom similar to findings seen in a study by

Conclusion

A patient presenting with an irreducible painful groin swelling should be immediately attended to. Tenderness in the swelling, abdominal distension, visible peristalsis are the main clinical features of a complicated groin hernia. The surgical intervention should be carried out as early as possible to avoid postoperative complications. The surgical procedure adopted should be tailor-made – herniorrhaphy or hernioplasty with adhesiolysis, resection and anastomosis of the intestine, Omentectomy depending on the condition of the contents of hernia.

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