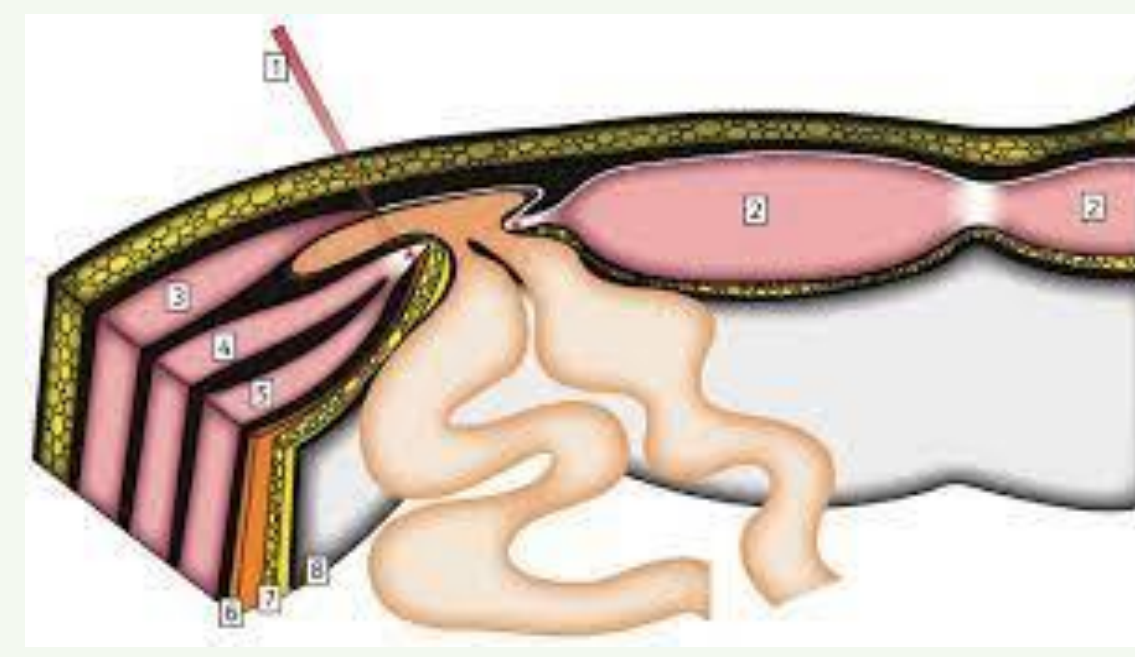




Rare presentation of Spigelian hernia in an adolescent female: A diagnostic challenge

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Objective

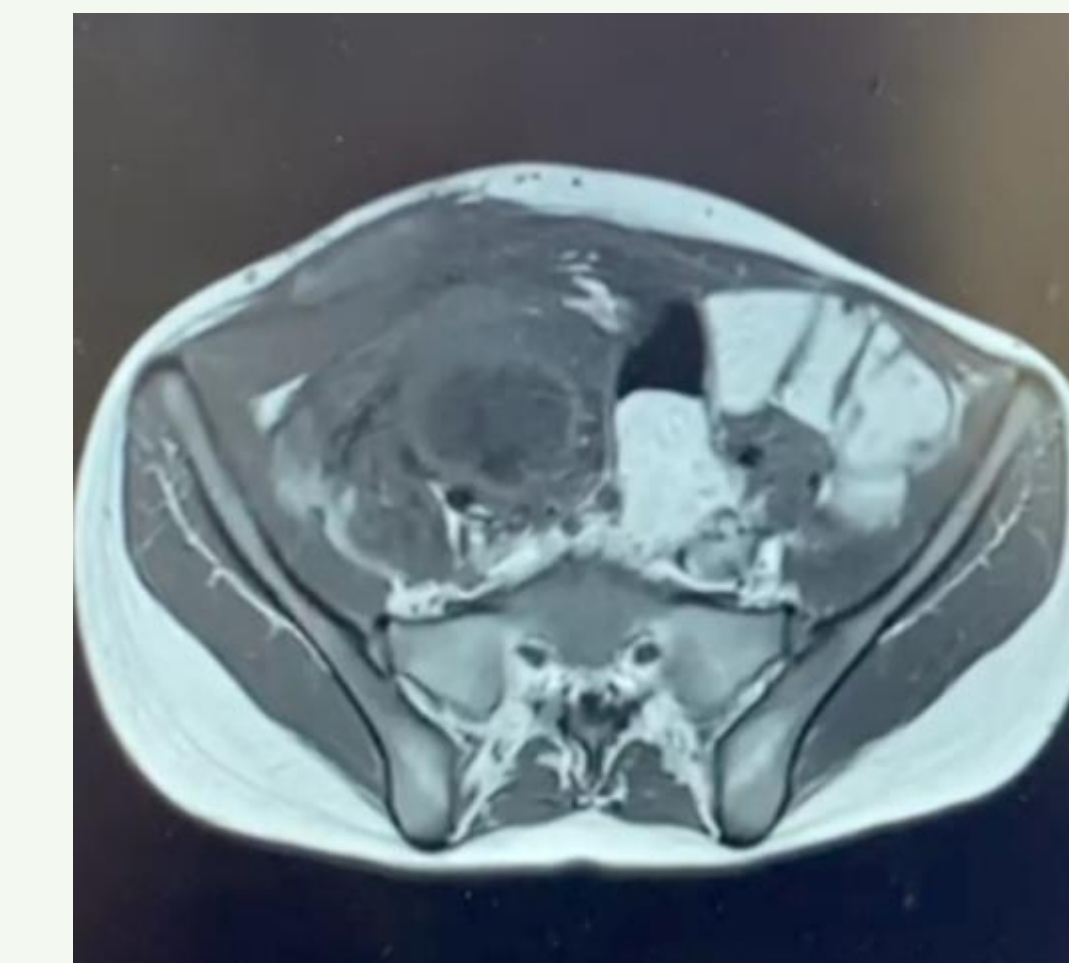
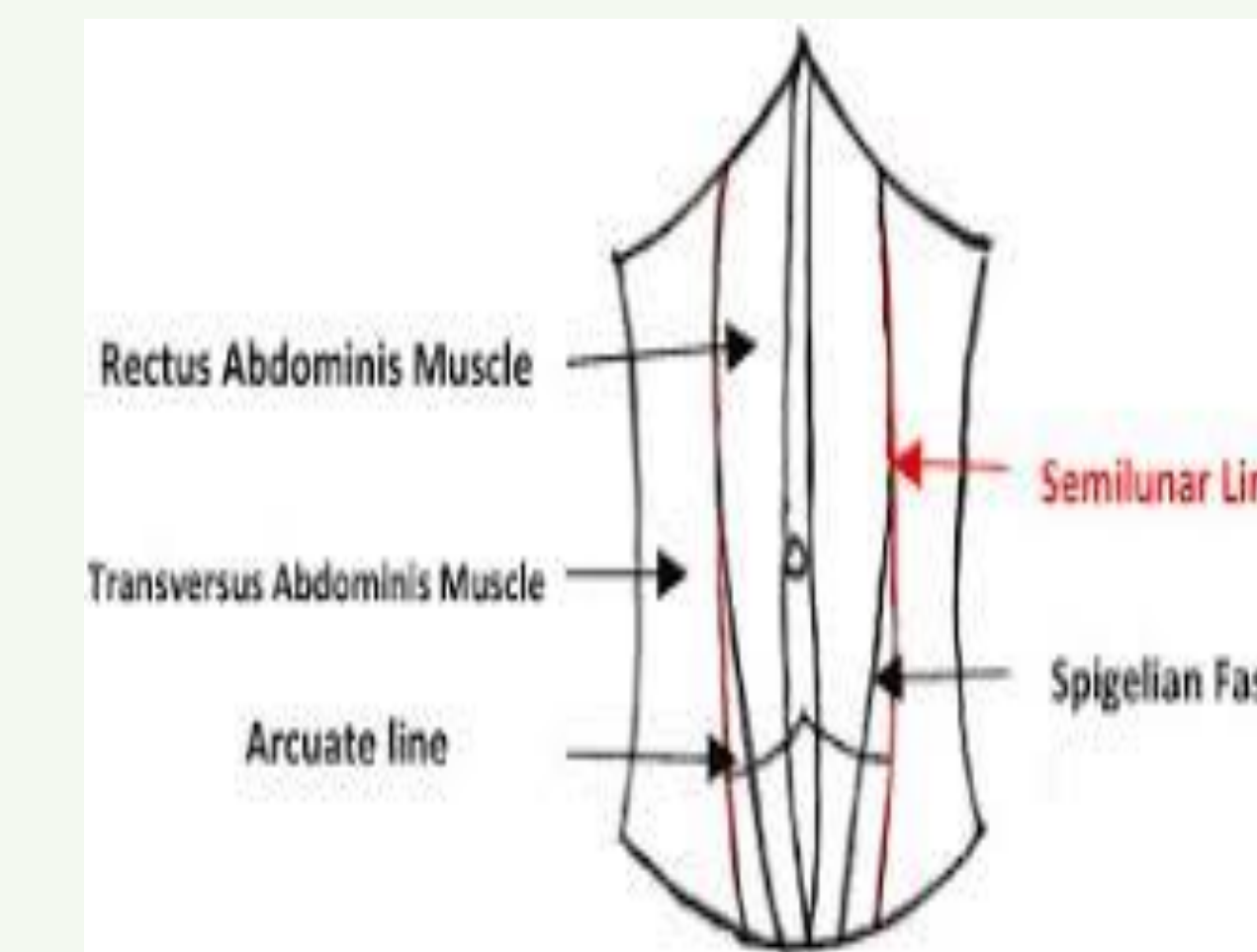
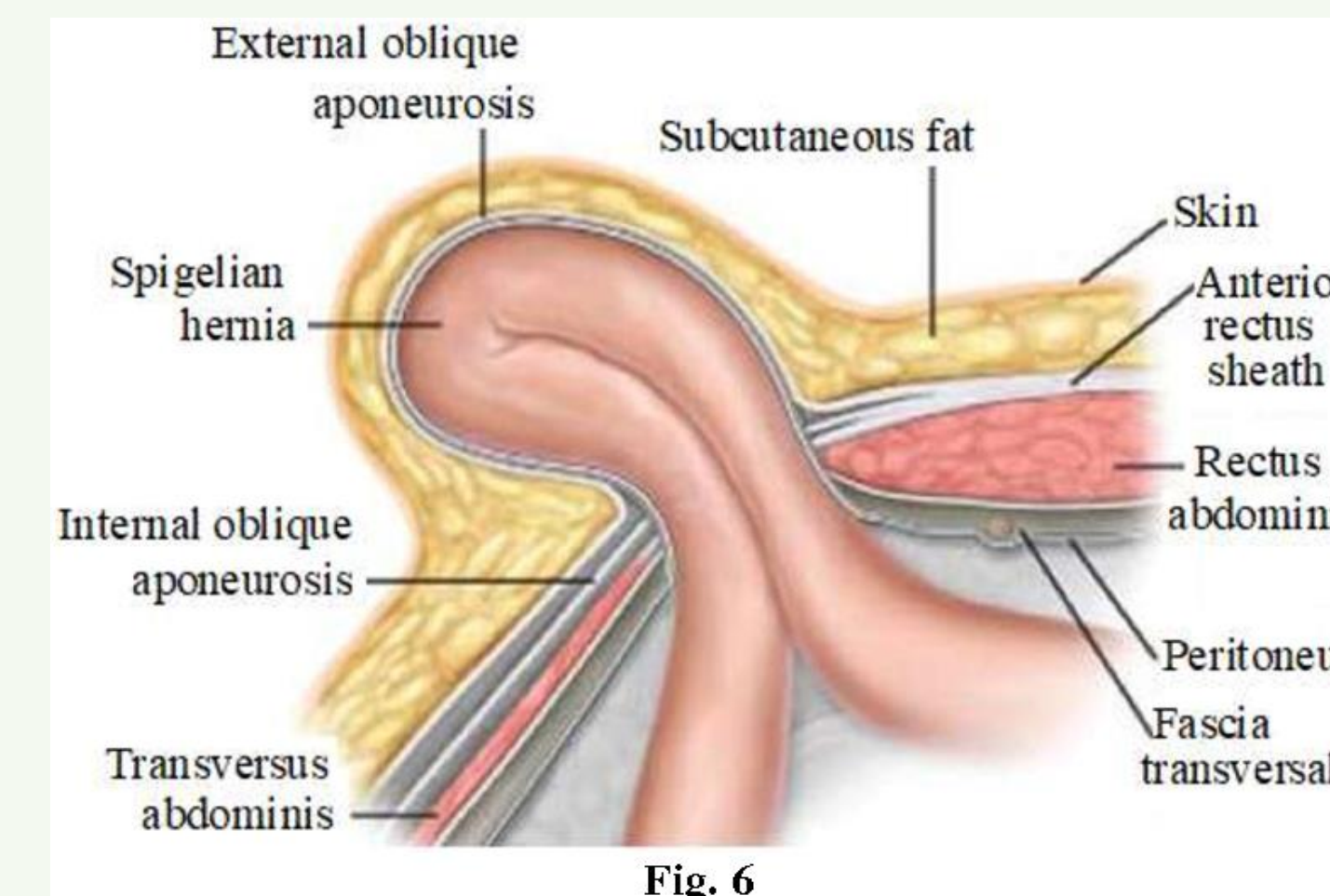
- We present a rare case of a spigelian hernia in a young girl that was initially treated as a tubo-ovarian abscess before the correct diagnosis was made

Case report

- Twelve year old girl presented to hospital with chronic abdominal pain which was worsening.
- On palpation there was an irregular tender mass arising from the right side of the pelvis
- MRI of the pelvis showed a right tubo-ovarian abscess with a few sinus formations
- The changes were thought to be secondary to a granulomatous disease such as a tuberculosis
- Tests for tuberculosis were negative
- A repeat MRI after ten days of intravenous antibiotics showed a persistent abscess
- CT guided drainage of the suspected abscess was undertaken
- Repeat imaging demonstrated an increase in size of the mass after drainage
- An exploratory laparoscopy was therefore undertaken
- A right sided spigelian hernia was diagnosed with incarcerated omentum and the hernia was repaired at the time of surgery
- The incarceration and strangulation of the omentum led to the abscess which was also removed at surgery

Discussion

- Spigelian hernias occur through slit like defects in the abdominal wall adjacent to the semilunar line
- The hernia ring is a well defined defect in the transversus abdominis aponeurosis
- Most common site is lower abdomen as the posterior sheath is deficient there



- Adult hernias are acquired because of trauma or increased intra-abdominal pressure.
- Those involving children are thought to be congenital
- Imaging can help to establish the correct diagnosis
- Only 50% of cases are diagnosed preoperatively as in our case
- Treatment is surgical (Laparoscopy)

Conclusions

- Because of the rarity of the condition in young patients, the diagnosis of Spigelian hernias can be often overlooked
- Our case highlights the importance of considering it as a differential of abdominal pain and mass in children