BILATERAL FEMORAL HERNIA PRESENTATION IN TRANSGENDER FEMALE

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BACKGROUND

Femoral hernias are a relatively rare type of groin hernia, more commonly occurring in individuals assigned female at birth

The female-to-male ratio for femoral hernias is approximately 10:1

CASE PRESENTATION

Case of a 62 year-old transgender female (assigned male at birth) with a complex history of bilateral femoral hernias. Initially, in 2019, the patient presented with a small fat containing left femoral hernia with no evidence of obstruction. The patient elected not to proceed with surgery and subsequently was lost to follow up. In 2022, the patient returned with a non-reducible left groin bulge inferior to the inguinal ligament, diagnosed as an incarcerated femoral hernia, necessitating urgent surgical intervention. The patient underwent a successful primary left femoral hernia repair with small bowel resection. In early 2023, the patient again presented with a new groin mass now on the right side. Physical examination revealed a right palpable mass inferior to the inguinal ligament, and imaging confirmed a right femoral hernia. A primary repair of the right femoral hernia was performed without complications, and the patient tolerated the procedure well.

CONCLUSION/DISCUSSION

This case illustrates the interesting occurrence of femoral hernias in an individual assigned male at birth, given the female-to-male ratio of 10:1

It also demonstrates an unusual presentation of an incarcerated left femoral hernia, which is less common due to the anatomical position of the sigmoid colon that produces a tamponading effect, reducing the risk of left-sided femoral hernias.

Additionally, bilateral presentation in this transgender female patient underscores the need for heightened clinical awareness and tailored management strategies that consider both the patient's gender identity and anatomical predispositions.

The role of female hormone administration may be involved in this unique situation.

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