UNEXPECTED TOXOPLASMA IN A ROUTINE LAPAROSCOPIC TRANSABDOMINAL PRELYMPHADENITISPERITONEAL INGUINAL HERNIA

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Background

- Inguinal hernias among the most common conditions encountered in general surgery.
- Laparoscopic transabdominal preperitoneal (TAPP) allows visualization of the myopectineal orifice & surrounding structures.
- Toxoplasmosis (*Toxoplasma gondii)* typically presents with asymptomatic or mild cervical lymphadenopathy.
- Present an unusual case of toxoplasma lymphadenitis discovered intraoperatively during elective TAPP.

Case Presentation

Patient: 32-year-old healthy male
History:
2-week history of right groin bulging and discomfort
No incarceration or strangulation
No significant PMH
Denied alcohol, tobacco, or drug use
Procedure:
Elective laparoscopic TAPP right inguinal hernia repair with mesh.
Intraoperative Findings:
2 × 2 cm shallow direct right inguinal hernia defect
Cord lipoma mobilized
Moderately enlarged right internal iliac lymph nodes identified
Largest node ~2 cm, excised via blunt dissection
Mesh repair with prolene mesh secured with absorbable tacks and Vicryl sutures
Patient tolerated procedure and was discharged.

Post-Operative Course

Post-op Day 1:
Severe abdominal pain
Forceful vomiting
Incisions intact without drainage
Laboratory Findings:
Neutrophilia
Normal lactate
No leukocytosis
Imaging:
CT abdomen/pelvis: lobulated fluid at surgical site
Management:
Empiric antibiotics: piperacillin–tazobactam and metronidazole
Symptom resolution
Discharged next morning

Pathology Findings

- Histopathologic examination revealed morphology suggestive of toxoplasma lymphadenitis:
- Expanded germinal centers
- Increased tangible body macrophages
- Prominent monocytoid B cells with perinuclear clearing
- Final diagnosis: **Toxoplasma lymphadenitis**

Discussion

- Toxoplasma lymphadenitis typically characterized by:
- Follicular hyperplasia
- Clusters of epithelioid histiocytes
- Monocytoid B-cell proliferation
- Most commonly presents as **cervical lymphadenopathy** in immunocompetent individuals.

This case emphasizes:

- Importance of careful intraoperative inspection
- Maintaining broad differential for unexpected lymphadenopathy
- Considering infectious etiologies even in asymptomatic, healthy patients

Conclusion

This case underscores the importance of comprehensive differential diagnosis during standard surgical procedures. Even common operations such as laparoscopic inguinal hernia repair may uncover rare infectious pathologies.
Surgeons should remain vigilant when encountering incidental lymphadenopathy, as early identification may alter patient counseling and management.

Clinical Pearls

- Enlarged lymph nodes encountered during routine surgery warrant evaluation
- Toxoplasma lymphadenitis may present without systemic symptoms
- Histopathology remains critical for diagnosis
- Routine procedures can reveal unexpected pathology