

AB197. 186. Case report: sigmoid carcinoma contained within a scrotal hernia in an octogenarian

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Background: Inguinal hernias are commonly seen in clinical practice and therefore consume a lot of healthcare resources. The lifetime risk for developing an inguinal hernia for men is 27% and females is 3%. Owing to the fact they can contain segments of bowel up to ten percent are at risk of incarceration causing intestinal obstruction, strangulation or infarction. Approximately 0.5% of inguinal hernial sacs contain malignancies however there are few case reports in the literature.

Methods: Here we present a case of an 81-year-old man who was referred to the Emergency Department with a 1-day history of right iliac fossa (RIF) pain radiating

down the into the inguinal region. He had no associated urinary or gastrointestinal symptoms and denied any systemic complaints such as weight loss. All vital signs were within normal limits. On examination he had a reduceable right inguinal hernia and a large left sided scrotal hernia containing bowel. He had been advised not to undergo surgical repair due to his co morbidities.

Results: Ultrasound of the scrotum revealed 'large left inguinal scrotal hernia containing omentum and bowel loops, on the right a high indirect inguinal hernia containing only fat tissue' was described. A CT was performed which revealed 'primary sigmoid colon malignancy lying within the left sided inguinal hernia and liver metastasis.

Conclusions: Our patient was offered surgery for his primary tumour and it was successfully resected within a week of admission. He made an excellent recovery and went on to undergo a course of chemotherapy.

Keywords: Sigmoid; carcinoma; scrotal; hernia

doi: 10.21037/map.2019.AB197

Cite this abstract as: Cotter A, Joyce W. Case report: sigmoid carcinoma contained within a scrotal hernia in an octogenarian. *Mesentery Peritoneum* 2019;3:AB197.