



AB157. SOH22ABS147. A rare case of obstructive uropathy caused by a scrotal swelling and inguinal bladder herniation

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Background: Inguinal bladder herniation (IBH) is rare pathological event, occurring in 0.5-5% of inguinal hernias. Since being described by Levine in 1951 as a scrotal cystocele case reported in the literature are limited. Diagnosis and treatment are frequently delayed due to the lack of specific clinical, laboratory and radiological findings. IBH can be associated obstructive uropathy, acute kidney injury and sepsis however preoperative diagnosis is difficult. Surgeons must be aware of IBH so to avoid unforeseen damage to bladder and ureters during inguinal hernia repair.

Case Description: A 73-year-old male presented to our institution with acute abdominal distension, malaise and dysuria. Additionally he reported difficulty passing urine and hesitancy for three months, with a worsening scrotal swelling over the previous five years. A bladder scan revealed an intravesical volume of 1,200 mL and urine dipstick was positive of leukocytes, nitrites and blood. A provisional diagnosis of urosepsis was treated with intravenous piperacillin/tazobactam. A rising creatinine despite catheterisation prompted a CT KUB, which demonstrated bilateral hydronephrosis secondary to obstruction caused by a narrow-necked right IBH. An emergency open Lichtenstein mesh repair of the inguinal hernia was performed. The patient recovered well and was discharged on post-operative day 8 with full resolution of the acute

kidney injury.

Conclusions: This is a rare case of an IBH presenting with urosepsis and an obstructive uropathy. Thorough assessment and decisive action led to a satisfactory outcome. Although rare worsening urinary symptoms associated with a scrotal swelling may herald an IBH, which if not diagnosed promptly, may result in significant morbidity.

Keywords: Bladder; emergency; hernia; inguinal; Lichtenstein mesh repair

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Footnote

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Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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