

# AB122. SOH23ABS\_073. Giant inguinoscrotal hernia with giant perforated duodenal ulcer

# Haroon Rashid, Muhammad Javid, Farman Akhtar, Jahan Khan, Nasir Ahmad

Department of Surgery, University Hospital Limerick, Limerick, Ireland

**Background:** Giant inguinoscrotal hernia is the Inguinal hernia extending below the midpoint of inner thigh in standing position. Giant inguinoscrotal hernia patient presented with variety of presentations and posing a challenging case for surgeon. We had unusual case of giant inguinoscrotal hernia with bowel perforation.

**Methods:** We have 67 years old gentleman presented with painful giant inguinoscrotal hernia and bowel not opened for 1 day. This pain was associated with belching, vomiting. He had multiple presentation with similar symptoms in the past. On examination he had irreducible hernia, tender with overlying skin erythema. Inflammatory markers were high. A computerized tomography (CT) scan showed Perforated duodenal ulcer. This case was managed with laparotomy, subtotal colectomy, omentectomy and repair over T tube for giant perforated duodenal ulcer.

**Results:** Patient took about 8 weeks for recovery and T tube was removed.

**Conclusions:** Giant perforated duodenal ulcer in giant inguinoscrotal hernia is very unusual case. This case was managed successfully with unusual approach.

**Keywords:** Giant inguinoscrotal hernia; giant perforated duodenal ulcer; irreducible hernia; bowel obstruction; T tube repair

## Acknowledgments

Funding: None.

## Footnote

*Conflicts of Interest:* The authors have no conflicts of interest to declare.

*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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### doi: 10.21037/map-23-ab122

Cite this abstract as: Rashid H, Javid M, Akhtar F, Khan J, Ahmad N. AB122. SOH23ABS\_073. Giant in-guinoscrotal hernia with giant perforated duodenal ulcer. Mesentery Peritoneum 2023;7:AB122.