



AB137. SOH23ABS_123. Complex strangulated ventral incisional hernia with skin necrosis—a challenging case

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Background: Complex ventral Incisional hernia is the defect in scar of previously repaired ventral hernia with loss of domain. Repair of complex incisional hernia is the challenging case in itself. Strangulation of bowel is unusual in large ventral hernia. We have 62 years' lady presented with abdominal pain and vomiting. She had this hernia for 20 years. On examination visible bowel in hernia defect of 30 cm. Hernia was tender and irreducible with overlying skin necrosis. She had raised inflammatory markers. Computed tomography (CT) scan showed free fluid with pneumatosis in the wall of dilated loop of colon.

Methods: Patient got midline laparotomy with right hemicolectomy. Condition of small bowel in the hernia sac is questionable. Temporary closure was done with abthera dressing and patient is transferred to intensive care unit (ICU). Patient was brought back to theatre for relook laparotomy. Ileostomy was made along with anterior component separation and excision of necrotic skin. Patient needs vacuum dressing for the anterior abdominal wound closure.

Results: Patient was managed with acceptable results of repair of complex hernia.

Conclusions: Strangulation of bowel can have happened in large complex hernia. Patients with large hernia should be counselled about the possibility of this complication

Keywords: Strangulated hernia; ischemic bowel; complex hernia; component separation; incisional hernia

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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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