

Damage control emergency surgery in giant parastomal hernia, a case report

Juan Gajda Escudero, Rocío Fernández Sánchez, Javier Martínez Alegre, María Hernández O'reilly, Inmaculada Mellado Sánchez, Carolina Peck García, Antonio Luis Picardo Nieto.
Infanta Sofia University Hospital - Madrid (Spain)

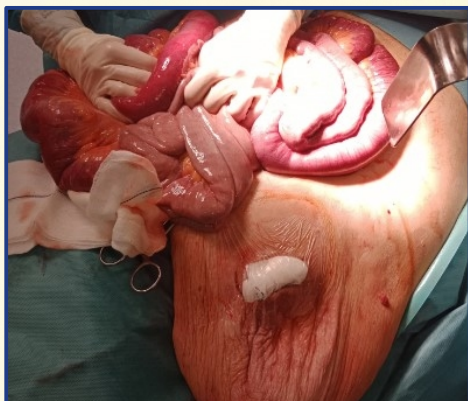
Aim:

The aim of this communication is to present a severe complication of parastomal hernia.

Material & Methods:

We present the case of a 79-year-old patient with history of rectal resection and terminal colostomy. He came to the emergency room for abdominal pain and non-functioning stoma. On examination he presented a giant parastomal hernia with loss of domain.

Abdominal scan shows a parastomal hernia with a defect of 10.8 cm, with sigma, transverse colon and jejunum inside. The portion of the transverse colon showed signs of obstruction with contained perforation. In view of these findings, emergency surgery was decided.

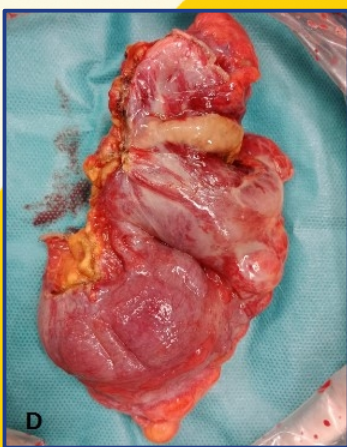


Results:

Midline laparotomy was performed, identifying a hernial orifice of more than 10cm with small intestine, sigma and transverse colon inside. Chelotomy and reduction of the herniated content was performed. Transverse colon with ischemia and contained perforation within the sac was observed. Since the perforation was contained in the sac, no peritonitis was identified. The affected segment was resected and anastomosis of the remaining colon was performed.

Given the poor condition of the patient and the large size of the hernia, damage control surgery was decided, without repairing the defect.

After surgery, the patient evolved satisfactorily, recovering transit through the colostomy and was discharged on the 7th postoperative day.



Conclusions:

- Intestinal perforation in parastomal hernia is a serious complication whose clinical manifestations may be masked by the initial absence of peritonitis.
- In large parastomal hernias, damage control surgery must be prioritized over the repair of the hernial defect, relegating its repair to a secondary stage.