

Spontaneous evisceration of long-standing ventral incisional hernia, a case report.

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Aim:

The aim of this communication is to present a rare complication of incisional hernias.

Material & Methods:

We present herewith the case of an 87-year-old female patient with personal history of long-standing ventral incisional hernia after colecistectomy. The patient came to the Emergency Room for sudden abdominal pain after bowel movement.

On examination, the patient presented umbilical hernia with cutaneous ulcerative changes, as well as cutaneous disruption with a small portion of omentum and small bowel protruding through it. In view of these findings, urgent intervention was decided.

Results:

Umbilical incision and resection of affected skin was performed. A hernia defect of 7cm with omentum and small bowel inside was identified. The hernia was reduced, the preperitoneal space dissected and the posterior rectus abdominis sheet was closed.

Polypropylene mesh was placed in the retromuscular space and the anterior sheet was closed.

The patient recovered satisfactorily and was discharged on the 4th postoperative day. At the one month follow-up, the patient presents continent abdomen with no other complications of interest.



Conclusions:

- Spontaneous evisceration due to cutaneous rupture is a rare but potentially serious complication that requires urgent surgery.
- It is important to evaluate cutaneous distress when assessing an uncomplicated hernia in order to prioritize its surgical treatment.