

De Garengoot Hernia, an acute appendicitis in a femoral hernia - a case report

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DE GARENGEOT HERNIA, AN ACUTE APPENDICITIS IN A FEMORAL HERNIA - A CASE REPORT

BACKGROUND



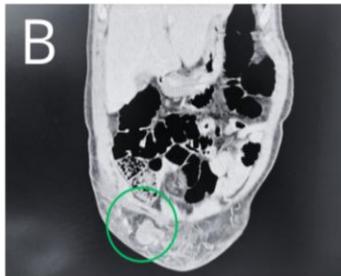
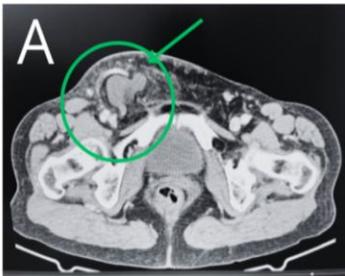
Femoral hernias make up a minority of abdominal wall hernias and are more common in females. A **De Garengoot hernia** is a hernia in the femoral canal that contains the ileocecal appendix. Among femoral hernias, the De Garengoot hernia has an **incidence of 0.1–5%**, making it extremely rare. These hernias, when incarcerated, can lead to acute appendicitis.

Their treatment is surgical and involves an appendectomy and hernia repair. **The use of a mesh** is still a subject of debate.

CASE REPORT



Female, 71 years-old
 Emergency room with **abdominal pain** and a **femoral mass** lasting 8 hours



Work-UP revealed an **analytical increase in inflammatory parameters**. CT scan showed a **right femoral hernia with the ileocecal appendix** in the hernia sac, which had an increased caliber and fluid within the sac (Figures A, B, and C).



The patient underwent surgical treatment via an open anterior approach, including an **appendectomy** and **femoral hernioplasty (plug mesh)**



The postoperative period proceeded uneventful, and the histological examination revealed changes consistent with acute appendicitis

DISCUSSION

In the presence of a De Garengoot hernia, it is necessary to **examine the ileocecal appendix**, assess the need for an appendectomy, and evaluate whether a **prosthetic mesh is required for the repair of the femoral hernia**. Understanding this rare type of hernia helps in planning future surgical interventions more effectively.

REFERENCES

