

Others

Morgagni Hernia in Adults: A Case Report

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Aim:

Morgagni hernia is a rare congenital diaphragmatic hernia, usually diagnosed in childhood. In adults, it is often incidental or presents with nonspecific symptoms, making diagnosis challenging. We report a case of an adult patient with Morgagni hernia managed laparoscopically.

Material & Methods:

A 24-year-old female, with no medical history, presented with 48-hour basithoracic pain without dyspnea. Clinical examination was unremarkable. Laboratory tests showed no inflammatory syndrome, and venous lactate levels were normal. A thoraco-abdominopelvic CT scan revealed a right anterior diaphragmatic

hernia containing fatty tissue, without signs of complication. The patient underwent laparoscopic surgery with hernia content reduction and primary closure of the diaphragmatic defect using non-absorbable sutures without mesh reinforcement.

Results:

A 24-year-old woman underwent laparoscopic repair of a Morgagni hernia containing only fatty tissue. The defect was closed using non-absorbable sutures without mesh. There were no intraoperative complications. The postoperative course was uneventful, with early oral intake and mobilization. The patient was discharged on postoperative day 2 without any complications.

Discussion:

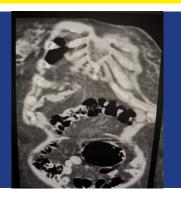
Morgagni hernia is a rare congenital diaphragmatic defect, often discovered incidentally in adults due to nonspecific symptoms. In this case, thoracic pain without systemic signs made diagnosis challenging. CT imaging was essential for identifying the hernia and ruling out complications. Laparoscopic repair offers excellent outcomes with minimal morbidity. When tissue quality allows, primary suture repair without mesh is a safe and effective option. Literature supports such minimally invasive, individualized management in young, low-risk patients.

Conclusion:

Morgagni hernia in adults is rare and may present with nonspecific symptoms. CT scan is essential for diagnosis. Laparoscopic repair is a safe and effective approach, with excellent outcomes and minimal morbidity.







References:

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