Ureter in Sliding Inguinal Hernia

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Introduction

Inguinal hernia is a common surgical problem. Caecum, Sigmoid colon and urinary bladder are the common contents in sliding inguinal hernia. Ureter is a very unusual content.

Case Report

A 52 years old male had reported with left sided painless groin swelling of five years duration. There were no urinary or bowel complaints. There was left groin partially reducible swelling with positive cough impulse. The scrotum, testes, epididymis and cord were normal. All the routine investigations were normal. Ultrasound of the abdomen and pelvis demonstrated mild prostatomegaly without any hydronephrosis. He was operated under spinal anaesthesia. Patient had sliding hernia with sigmoid colon as the content. While dissecting the cord, besides the normal contents, ureter was seen (Fig. 1). All structures were protected and pushed back to the extraperitoneal area. Lichtenstein's repair was done. Patient recovered well. Ultrasonography at two weeks and six weeks were normal. During the follow up period of over 48 months, he has done well without any recurrence of hernia and hydronephrosis.

Discussion

Ureter in the hernial content is rare and in a

Fig. 1 : Vas upper and ureter lower

retrospective review of 1950 groin hernias, the incidence of urinary bladder as its content was 0.36% with no ureter as content [1]. 139 cases of ureter in hernia have been described in literature [2]. Only one such case is diagnosed on a preoperative urogram [3]. In 190 cases of urological organ as the hernia content, 11.25 were associated with urological malignancy and 23.5% were complicated [4]. From an anatomical and pathological point there are two types uretero-inguinal hernia : para peritoneal (more frequent) and extraperitoneal (uncommon) [5]. Extraperitoneal type often presents with urinary symptoms [6]. The present case is extraperitoneal type as it was close to the vas deferens and ureter could be identified and protected. Standard herniorrhaphy could be dangerous with the presence of ureter in hernia with a possibility of injury and post operative complications [3-7].

Conflicts of Interest

None identified

References

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