

CASE REPORT

AMYAND'S HERNIA AND ITS TREATMENT IN A PREMATURE NEWBORN BABY

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ABSTRACT

The presence of vermiform appendix in a groin hernia is defined as Amyand's hernia. Amyand's hernia is rare during the newborn period, especially in premature babies. Amyand's hernia is usually detected during surgery in patients who are operated for incarcerated or strangulated hernia during the newborn period. In this case report, our aim was to present a case of Amyand's hernia which was operated due to right strangulated hernia and adherent appendix vermiformis was seen in hernia sac during the surgery. Because appendix vermiformis was inflamed and adherent to the sac, and there were findings of peritonitis during the surgery appendectomy was performed with hernioplasty. With this case report, we want to remind that appendix vermiformis may be found in the sac of an inguinal hernia during the neonatal period and we planned to discuss the conditions in which appendectomy should be performed.

Keywords: Premature, Amyand's hernia, Appendectomy

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INTRODUCTION

The presence of normal or inflamed appendix in the incarcerated groin hernia is defined as Amyand's Hernia [1]. The disease was named after Claudius Amyand, the surgeon of King George the Second who performed a successful appendectomy to an 11-year-old child after finding the perforated appendix in the inguinal hernia sac in 1735. The incidence of appendix vermiformis in hernia incisions has been reported in the literature as 1% for the normal appendix and 0.08-0.13% for the inflamed appendix. It is very rare in infants and newborn babies [3,4]. In this case report, we would like to present Amyand's hernia which was detected during the operation of a premature newborn baby for strangulated inguinal hernia and its treatment as a case report.

CASE REPORT

The case was born at 990 g at 30th week with a cesarean section as the first child of a preeclamptic mother. The case was followed in the 3rd level neonatal intensive care unit of our hospital due to respiratory problems and prematurity and a right-sided

reducible inguinal hernia was detected. The patient was scheduled for operation under elective conditions. However, the decision for the emergent operation was made for strangulated right inguinal hernia due to development of uneasiness, inability to feed, vomiting, and irreducible hernia during the follow up

Picture 1: Amyand's Hernia

