

AN INTERESTING ILEUS CASE: MORGAGNI HERNIA

SAMET YALÇIN*
ÖMER PARLAK**
ALI ERKAN UÇAR**
LEVENT ÖZTÜRK***
MEHMET SAIT DOĞAN****

SUMMARY: Morgagni hernia is a congenital defect that occurs in adult patients without the presence of a traumatic event. In this case a 76 years old male patient is described who admitted to emergency room with abdominal pain and obstipation. The diaphragma defect was repaired and the herniated sac was reduced in the emergent laparotomy applied.

Key Words: Morgagni hernia, emergency room.

INTRODUCTION

Morgagni Hernia is a congenital defect which develops from the agenesis of diaphragmatic crurae and costal and sternal elements and seen as 2% (1,2). These patients are usually asymptomatic after birth, may not give any symptoms and so may not be diagnosed till adult period. The symptoms may be mild or moderate substernal pain in symptomatic patients. Severe pain also may be seen in strangulated or incarcerated patients. In this case, the difference is the presentation

of the patient with ileus to the emergency room and his being at old age.

CASE REPORT

Seventy six male patient admitted to emergency room with severe abdominal pain, distension and constipation for ten days. In physical examination abdominal distension, diffuse sensitivity and defense were found in the patient with no other additional diseases. There were fluid and gas levels in direct abdominal X-ray graphics (Figure1).

Leucocytosis was found in complete blood count study. In the emergent explorative laparotomy of the patient, it is seen that the omentum and the transverse colon was herniated to thoracic cavity from the right side Larrey distance (Figure2). The defect was approximately 10 cm size. There were no necrotic or ischemic segments in the herniated transverse colon. The ischemic

* From Ankara Yıldırım Beyazıt University, Faculty of Medicine, Ankara Atatürk Education and Research Hospital Department of General Surgery, Ankara, Turkey.

** From Ankara Atatürk Education and Research Hospital Department of 2nd General Surgery, Ankara, Turkey.

***From Ankara Yıldırım Beyazıt University, Faculty of Medicine, Ankara Atatürk Education and Research Hospital Department of Anesthesiology, Ankara, Turkey.

**** From Mardin State Hospital, Department of Radiology, Mardin, Turkey.



Figure 1:

herniated omentum segment was resected. The patient dearched his gas and stool, his general condition went better and he was discharged with medical suggestions on the postoperative 10th day of hospitalization.

DISCUSSION

Morgagni hernia is a congenital defect and in

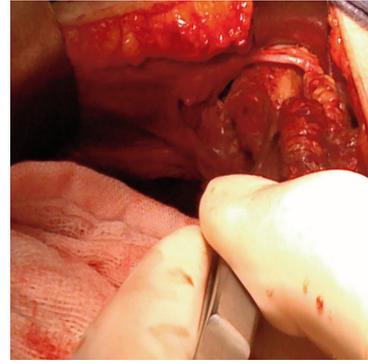


Figure 2:

develops mostly on right side with a percentage of 90 (2). In 95% of patients, a hernia sac is found and omentum and colon are found in this sac (3). Also in this case the herniated organs were found in a sac. In morgagni hernias the surgical approach is transabdominal (4). Also in our patient, approach transabdominal surgery was done. But the patient's advanced age and presentation with ileus had never constituted a suspicion of morgagni hernia.

As a result, it shouldn't be forgotten that the cause of ileus may be morgagni hernia, also it is a very rarely seen disease.

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Correspondence:

Samet Yalçın
Ankara Yıldırım Beyazıt Üniversitesi,
Tıp Fakültesi,
Ankara Atatürk Eğitim ve
Araştırma Hastanesi,
Genel Cerrahi Bölümü,
Ankara, TURKIYE.
e-mail: sametyalcin71@yahoo.com