

상염색체 우성 다낭성 신질환 환자에서 발생한 폐쇄공 탈장

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A Case of Obturator Hernia in Patient with ADPKD

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Obturator hernia is a rare pelvic hernia with incidence of 1%. The hernia sac passes through the obturator foramen, following the path of the obturator nerves and muscles. Obturator hernia is commonly found in elderly, emaciated, and women with concurrent medical condition. The diagnosis of obturator hernia is difficult because symptoms are nonspecific. Delayed diagnosis and surgical intervention contributed to its relatively high morbidity and mortality. The cases of obturator hernias with autosomal dominant polycystic kidney disease were not commonly reported. We present a case of an obturator hernia with an autosomal dominant polycystic kidney disease. The 62-year-old woman visited our hospital because of intermittent nausea, vomiting, right thigh and hip pain. Physical examination revealed a distended abdomen without tenderness or muscle guarding. Bowel sound was decreased. No mass was palpated in the bilateral groin. Tenderness was in right hip. Range of motion was limited in right hip joint due to the pain when the right leg moved. A radiograph of the abdomen showed dilated loops of small bowel suggestive of small bowel obstruction. Enhanced computed tomography of the abdomen and pelvis was performed. The CT scan showed obvious intestinal obstruction with focal bowel herniation sac in the right obturator canal area, also CT scan showed various size of multiple cystic lesion in liver and both kidney. She was diagnosed an obturator hernia. An emergency herniorrhaphy was performed. The obturator hernia should be included in the differential diagnosis if clinically suspected. There is a significantly increased incidence in all types of hernias in patients with ADPKD, compared with the general population and other patients. Obturator hernia is a rare disease and the diagnosis of obturator hernia is usually difficult. Obturator hernia should be suspected when an elderly, emaciated, and chronically ill women without a history of abdominal surgery presents with symptoms of bowel obstruction or nonspecific pain over the thigh and hip. Detailed history taking and physical examination provide diagnostic clue for suspected obturator hernia. CT scan is valuable to establish preoperative diagnosis. Therefore routine preoperative CT scan should be considered in suspected patients. Early diagnosis and prompt surgical treatment are essential to reduce the morbidity and mortality.

Key Words: 다낭성 신질환, 폐쇄공 탈장, 진단

Polycystic kidney disease, Obturator hernia, Diagnosis