Case report

Urinary bladder herniation rare preoperative incidental finding radiological features

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ABSTRACT

A patient with bleeding per rectum and left inguino-scrotal hernia was incidentally found to have urinary bladder herniation on imaging studies. Prostate size and bilateral kidneys were normal. It is a rare case of pre operative detection of bladder herniation. Urinary bladder herniation is highly important to be detected preoperatively because of the high risk of bladder injury during surgery.

1. Introduction

Most bladder hernias involve the inguinal and femoral canals, with the latter more frequent in women, and a predilection for the right side has been reported. A variety of factors can contribute to the development of bladder hernias. Among these are the presence of urinary outlet obstruction causing chronic bladder distention and contact of the bladder wall with the hernia orifices, loss of bladder tone with weakness of supporting structures, pericystitis and perivesical bladder fat protrusion, obesity, and the presence of space-occupying pelvic masses [1-7].

A 54 yr /M with history of bleeding per rectum was subjected for colonoscopy and a non-negotiable growth was found at the splenic flexure. On general examination the patient had left sided inguino-scrotal hernia. The patient was subjected for CT abdomen for further evaluation. The patient had left sided inguino-scrotal hernia of which bladder was a content. The herniated part of bladder showed continuation and contrast accumulation in delayed phase. IVU and MRI which was performed showed the dumbbell shaped bladder herniation [6-10].

Considering patient age and difficulty in voiding BPH was considered to be a differential diagnosis. However on USG prostate size was normal and PSA levels were also normal. Bilateral kidneys were normal. Surgery was performed and resection and anastomosis was done for the splenic flexure growth and left inguinal herniory was performed. Small bowel and urinary bladder were found to be contents of the hernia. There was no intraoperative complications and no resection of bladder was done [12].

2. Discussion

Urinary bladder hernia is seen in 1-3% of inguinal hernias. Only about 7% of bladder hernias are diagnosed preoperatively. Most of them are diagnosed inoperatively and some when they presented with postoperative complications. Urinary bladder herniation is highly important to be detected preoperatively because of the high risk of bladder injury during surgery [9-12].

3. Conclusion

Even though rare urinary bladder hernia should be suspected in every male patient with suspicious bladder symptoms and the patient should undergo radiological evaluation to detect bladder hernias if any to decrease chances of any iatrogenic injury to the bladder.

FIGURES
CT images showing left sided urinary herniation

4. References


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