

Case Report on Right Indirect Inguinal Hernia

Ruchita Gohane*, Sheetal Sakharkar, Ruchira Ankar

Department of Medical-Surgical Nursing, Datta Meghe Institute of Medical Science, Maharashtra, India

ABSTRACT

Introduction: Indirect inguinal hernia is a type of inguinal hernia. An indirect inguinal hernia is a bulging of the abdominal organ or tissue. Indirect inguinal hernia is mainly found in males than women. Some surgery like herniorrhaphy and hernioplasty are used to repair hernia.

Main symptoms and clinical essential finding: The patient is 70 years old male admitted to Acharya Vinobha Bhawe rural hospital on 15/11/2021 with a chief complaint of abdominal pain and swelling on the right side inguinal region. After investigation, an x-ray CT scan and CBC are done. The patient was diagnosed with a right indirect inguinal hernia.

The main diagnosed/Therapeutic intervention/Outcome: The patient is 70 years old male admitted to Acharya Vinobha Bhawe rural hospital on dated 15/11/2021, and the physician found the diagnosis as right indirect inguinal hernia. Physicians manage the patient's disease condition by advising hernioplasty, some nutritional supplements, antibiotics, and analgesic to relieve pain after getting appropriate treatment patient's condition improved.

Key words: Hernioplasty, Herniorrhaphy, Nursing management

HOW TO CITE THIS ARTICLE: Ruchita Gohane, Sheetal Sakharkar, Ruchira Ankar, Case Report on Right Indirect Inguinal Hernia, J Res Med Dent Sci, 2023, 11 (02): 032-035.

Corresponding author: Ruchita Gohane

E-mail: ruchitagohane15@gmail.com

Received: 07-Mar-2022, Manuscript No. JRMDs-22-56261;

Editor assigned: 10-Mar-2022, PreQC No. JRMDs-22-56261 (PQ);

Reviewed: 24-Mar-2022, QC No. JRMDs-22-56261;

Revised: 31-Jan-2023, Manuscript No. JRMDs-22-56261 (R);

Published: 28-Feb-2023

INTRODUCTION

Inguinal hernia is a type of hernia. There are two types of inguinal hernia such as direct inguinal hernia and indirect inguinal hernia. Right indirect inguinal hernia is a bulge of abdominal cavity contents through the inguinal canal [1]. Abdominal wall hernias are most common in an inguinal hernia. Right indirect inguinal hernia mainly occur in the abdominal region in men. 75 to 80 years old people mainly suffer from this type of hernia. In adult hernia is repair by using procedure of open hernia surgery like laparoscopy, hernioplasty and herniorrhaphy. In Infant Inguinal hernia is treated by using herniotomy. Most of the cases surgery is necessary to repair hernia. The surgical recovery duration of hernia is approximately three weeks. The many factors affect during surgery are infection, bleeding vomiting and difficulty occur in pain management. Right indirect inguinal hernia is common in men than women. The male to female ratio is seven is to one (7:1) for an indirect inguinal hernia in 2006. An approximated 27 per cent of men and only 3 per cent of women found with right indirect inguinal hernia [2]. The causes of right indirect inguinal hernia disease are-sometimes present at the birth time in an infant because of abdominal wall defect. In adult most common cause are Increase pressure within the abdomen because of his regular heavy lifting work,

excess weight and smoking, straining during bowel movement and urination. Past history of Benign Prostatic Hyperplasia (BPH). In indirect inguinal hernia detect with the help of urine test and blood test. Diagnosed the indirect inguinal hernia with the help of fingers tip by palpation. MRI, CT scan, X-ray and ultrasound picture also help to diagnose the indirect inguinal hernia. Some surgical procedure available for indirect inguinal hernia such as hernioplasty and herniorrhaphy both are open inguinal hernia repair surgery. After open hernia repair surgery suggest medication for some period of weeks to manage or treat postoperative surgery pain. Give advice to the patient to avoid forceful activities and heavy lifting. Give proper rest for some period of time after surgery [3].

CASE PRESENTATION

Management of hernia including are-maintain proper weight, manage body fat, Eat proper vegetables, fiber rich diet and fresh fruits [4]. Suggest and give advice to the patient to avoid smoking because smoking cause serious coughing. Which cause of abdominal pain and swelling. Every day eat whole grains to keep away from constipation and mainly avoid spicy foods. After surgery give proper medication by physician order. Come for follow-up after surgery in every week. The follow-up help to the patient about recovery rate and also clarify any doubt. After surgery patient do not do any forceful work, do short physical activity, starting days after surgery patient should walk very slowly. Come to the hospital and continue the care and medication [5].

Patient identification

A male patient of 70 years old male from Telhara Dist. Akola admitted to surgery ward no. 42 in Acharya Vinobha bhawe rural hospital on dated 15th Nov 2021. Know the case of right indirect inguinal hernia. Weight-75 height-188 cm.

Present medical history

A male patient of 70 years old was admitted to Acharya Vinobha Bhawe rural hospital on dated 15th Nov 2021 by his family with complaint of abdominal pain since 1 year. He was admitted to surgery ward no. 42. He is known the case of indirect inguinal hernia and patient is weak and inactive on admission time [6].

Past medical history

A male patient 70 years old Male admitted in Acharya Vinobha Bhawe rural hospital on dated 15/11/2021 he was diagnosed to have hernia at the age of 70 year old. He is having past medical history of benign prostatic hyperplasia.

Present surgical history

The patient 70 years old male he was diagnosed to have right indirect inguinal hernia, Now the patient Undergoes for surgery' hernioplasty' with spinal anesthesia.

Family history

There are total four members in the family. My patient was diagnosed to have right indirect inguinal hernia and other members of the family are good health status. He is belongs to nuclear family were not having complaint in their health except for the patient who was being admitted in hospital [7].

Clinical finding

Peristalsis swelling over right inguinal region, cough impulse, overlying skin and fever (Temperature-100°F).

Diagnostic evaluation

The patient is 70 years old male admitted in acharya vinobha bhawe rural hospital on dated 15/11/2021. Complete blood count investigation, blood test Hb-15.1 gm%, total red blood count-5 million/cumm, red cell distribution width test-13.3%, hematocrit-42.6%, total white blood count-1000/cumm, monocytes-4%, granulocytes-58%, lymphocyte-30%, urea-32 mg/dL, creatinine-0.9 mg/dL, sodium (Na⁺)-140 mmol/L, potassium (k⁺)-4.3 mm oil/L, albumin-4.6 g/L, total bilirubin-0.8 mg/dL (Table 1) [8].

Table 1: Diagnostic evaluation of blood components in 70 years old male patient.

Diagnostic evaluation	
Blood components	Percentage of distribution
Hb	15.1%
Total red blood count	5 million/cumm
Hematocrit	42.6%
Total white blood count	1000/cumm,
Monocytes	4%
Granulocytes	58%
Lymphocyte	30%
Urea	32 mg/dL
Creatinine	0.9 mg/dL
Sodium (Na ⁺)	140 mmol/L
Potassium (k ⁺)	4.3 mm oil/L
Albumin	4.6 g/L
Total bilirubin	0.8 mg/dL

Ultrasound picture

Patient abdominal ultrasound picture is done. Some abnormality found in right inguinal region. No other abnormalities found in another area.

Physical examination

There is not much abnormality found in Head to foot examination except abdomen, in abdomen it's found pain

and swelling over right inguinal region. Patient looks like dull and weak.

Therapeutic intervention

The patient is 70years old male admitted in acharya vinobha bhawe rural hospital on dated 15/11/21. With chief complaint of abdominal pain and swelling over inguinal region. The physician was finding diagnosed as right indirect inguinal hernia. The physician managed the

patient by advising tab. Limcee 1 tab once a day, tab supradyn one tab once a day, tab. pan one tab once a day, injection neomal thrice a day, tab. ibuprofen twice a day [9].

Nursing perspectives

Assess the general condition of the patient. Monitoring the vital sign is recorded on regular basis. Show a reaction to the treatment or a reply to the treatment. The nurses should give her whole attention to indirect inguinal hernia patient. Provide a proper care to the patient. Give psychological support to the patient. Advice a good nutritional supplement to the patient. When patient administering analgesic drugs observe for adverse effects and supporting patient emotionally. Advice to do early morning yoga and medication. Advice to take medication daily and explain side effects and the benefits to the family members of the patient and the patient. The nurse help the patient in recover his advance level of the independence and enjoyment after a full retaking [10].

RESULTS AND DISCUSSION

A male patient of 72 years old from Telhara Dist. Akola was admitted to surgery ward no. 42 in Acharya Vinobha Bhawe rural hospital on dated 15th Nov 2021 with a complaint of abdominal pain and swelling on right inguinal region. He was known a case of Right indirect inguinal hernia disease. He was admitted to hospital. Investigation was done and appropriate treatment was started and surgery is done. The cause of right indirect hernia disease is sometime present at the birth time because abdominal wall defect in adult most common cause increase pressure within the abdomen because of his regular heavy lifting work, excess work and smoking. Straining during bowel movement or urination and also past medical history of Benign Prostatic Hyperplasia (BPH) [11].

Indirect inguinal hernia found in 66% on the Right, 30% on the left side and 10% of patient found with both sides (bilaterally). According to the National Institute of kidney disease and digestive disease and diabetes disease, The inguinal hernia mostly occur on the right side region because of late drop (fall) of the testicles. Indirect inguinal hernia is found about 65% in adult male and 55% of patients found in right side region. Complete blood count is done in an investigation and also X-ray, CT-scan, blood sugar test, renal test is done in an investigation. Past history of benign prostatic hyperplasia is cause of indirect inguinal hernia. Physical examination also helps to detect indirect inguinal hernia. Inspection, palpation of abdominal surface, temperature, tenderness, expandable coughs impulse and identifies the causes of how to increase abdominal pressure. Check vital sign of patient such as blood pressure, pulse, temperature and respiratory rate and assess the general condition of the patient. After getting proper treatment he is show great improvement and the treatment was still going on till my last date of care. After surgery suggest medications for

some period of weeks to manage postoperative surgery pain [12].

CONCLUSION

Right indirect inguinal hernia is the most common in men. The patient was admitted to surgery ward no. 42 at Acharya Vinobha Bhawe rural hospital with known case of right indirect inguinal hernia and he had complaint of abdominal pain and swelling over right inguinal region, after getting treatment and surgery (Hernioplasty) condition was improved.

CONSENT AND ETHICAL APPROVAL

The patient inform consent was obtained and signed by the patient before writing a case report, ethical approval is not approval.

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