IS-006 Laparoscopic strategy for inguinal hernias containing ovary in girls: When to operate irreducible ovary?

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Purpose: Sliding indirect inguinal hernias containing the ovary and fallopian tube are not uncommon in younger girls. In cases of incarcerated inguinal hernias in girls, however, ovarian herniation or ovarian torsion is seen in high incidence. Although an irreducible ovary is not at great risk of incarceration, this condition may develop to a significant risk factor of torsion or strangulation. This paper describes when irreducible ovaries should be operated.

Materials and Results: 517 children (330 boys and 187 girls) with inguinal hernia were treated with laparoscopic percutaneous extraperitoneal closure (LPEC) for 11 years. Of 187 girls with inguinal hernia, 37 had a diagnosis of containing ovary in hernial sac. Of them, 11 (ages ranged from 4 weeks to 2 years) were identified irreducible ovarian hernia. 10 were corrected laparoscopically and their hernial orifices were repaired by LPEC. Their ovaries revealed swelling with edema at surgery. One who waited by surgery developed to incarcerated ovarian hernia and she was done with oophorectomy.

Discussion and Conclusion: Sliding indirect inguinal hernias containing the ovary and fallopian tube have a possibility to be irreducible ovarian hernia that maybe develop to incarcerated or strangulated ovarian hernia. Many of irreducible ovarian hernias can be corrected laparoscopically and their hernial orifices are repaired easily by LPEC. We suggest that irreducible ovarian hernia should be treated by LPEC, as soon as possible.