Botulinum Toxin Type A and Progressive Preoperative Pneumoperitoneum in Large Giant Inguinoescrotal Hernias

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Large inguinal hernia; Primary hernia; Inguinoscrotal hernia; Botulinum toxin type A; Progressive preoperative pneumoperitoneum

Clinical Image
When we have great hernias outside the abdominal cavity like large groin in guinoescrotal hernias, morgagni hernias..., there turn to their home must be difficult appearing sometimes compartment abdominal syndrome (Figure 1-5). In the last five years we have treated 10 cases of different primary hernias with botulinum toxin A, PPP or both combined [1-5]. In all cases we perform CT scan in valsalva and we measure the volume of the hernias and the volume of abdominal cavity and the ratio (Figures 6-8). We could close all the defects and return the intestinal contents to their home in all cases [6,7]. The use of both techniques together must be implemented routinely in this type of hernias (Figure 9,10).

Figure 1: Botulinum Toxin-A+Progressive Preoperative Pneumoperitoneum before Surgery.
Figure 2: Botulinum Toxin-A+Progressive Preoperative Pneumoperitoneum before Surgery.

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Figure 3: CT Scan before BT-A and PPP.

Figure 4: CT Scan after BT-A and PPP.

Figure 5: Intestinal Contents.

Figure 6: View after repairing the hernia.

Figure 7: Result at the end of surgery (case 1).

Figure 8: Result at the end of Surgery (Case 2).

Figure 9: Results 6 months after Surgery (Case 1).

Figure 10: Results 1 year after Surgery (Case 1).

References

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