CIRUGÍA ESPAÑOLA

www.elsevier.es/cirugia

Image of the month

Complicated Parastomal Hernia as a Clinical Presentation of a Gallbladder Hydrops☆

Eventración paraestomal incarcerada como manifestación clínica de un hidrops vesicular

Miquel Gomez-Artacho,[a,*] *Gildas Boisset,*[b] *Christophe Taoum,*[b] *Francis Navarro*[b]

[a] *Servicio de Cirugía General y Digestiva, Hospital Universitari Germans Trias i Pujol, Badalona, Barcelona, Spain*
[b] *Service de Chirurgie Digestive et Transplantation, Centre Hospitalier Regional Universitaire de Montpellier, Languedoc-Roussillon, France*

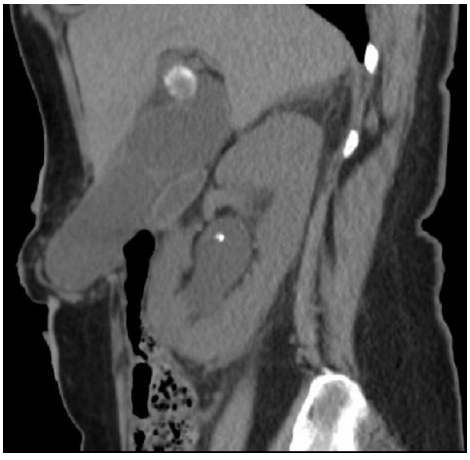

Fig. 1

The patient is a 50-year-old woman with a history of chemoradiotherapy, hysterectomy and anterior resection of the rectum due to locally advanced cervical cancer, with a diverting lateral colostomy in the right hypochondrium and right nephrostomy. The patient came to the emergency room due to abdominal pain and vomiting as well as swelling around the stoma. Lab work-up detected elevated acute-phase reactants. A computed tomography scan (Fig. 1) showed a parastomal hernia with the distended gallbladder in its interior. We decided to perform cholecystectomy by right subcostal laparotomy, which revealed a gallbladder hydrops with incipient signs of acute cholecystitis due to a gallstone lodged in the Hartmann pouch. In addition, the incisional hernia was repaired with primary closure of the defect on the inner face. Given the provisional nature of the colostomy, prosthetic mesh repair was ruled out.

☆ Please cite this article as: Gomez-Artacho M, Boisset G, Taoum C, Navarro F. Eventración paraestomal incarcerada como manifestación clínica de un hidrops vesicular. Cir Esp. 2017;95:347.

* *Corresponding author.*
E-mail address: miquelgomart@hotmail.com (M. Gomez-Artacho).