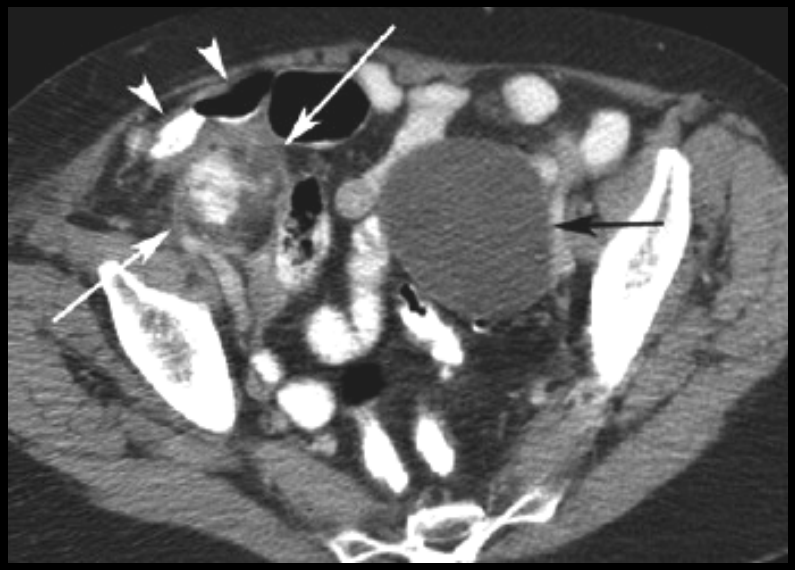
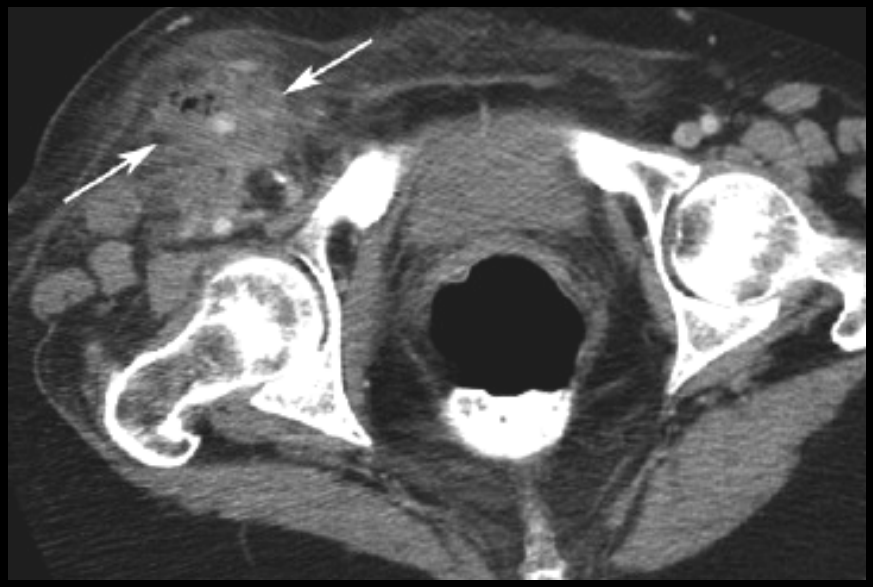
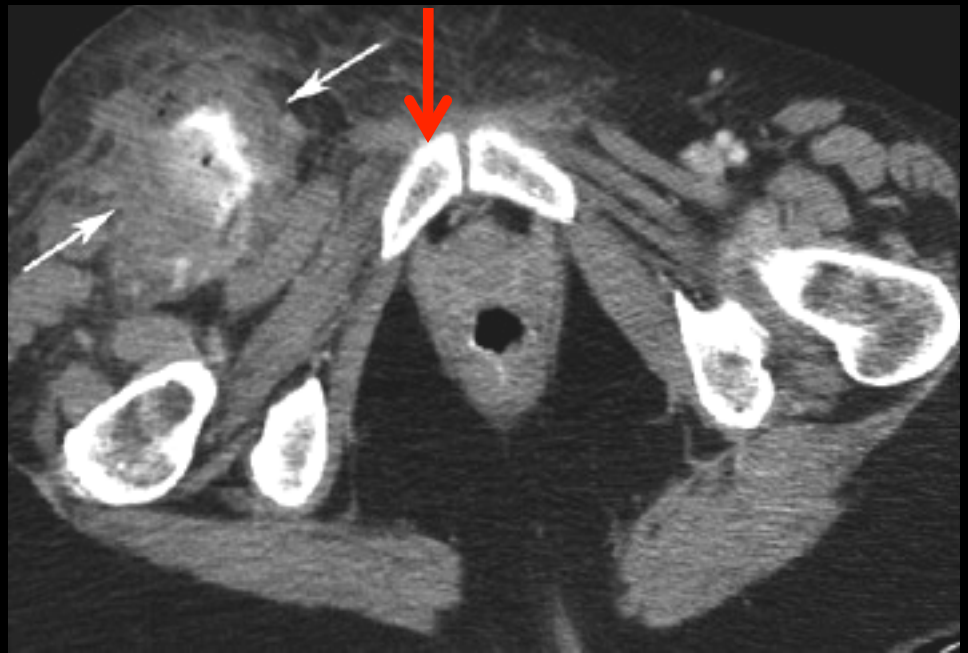
femme 71 ans ; abcès de l'aine évoluant depuis 15 jours







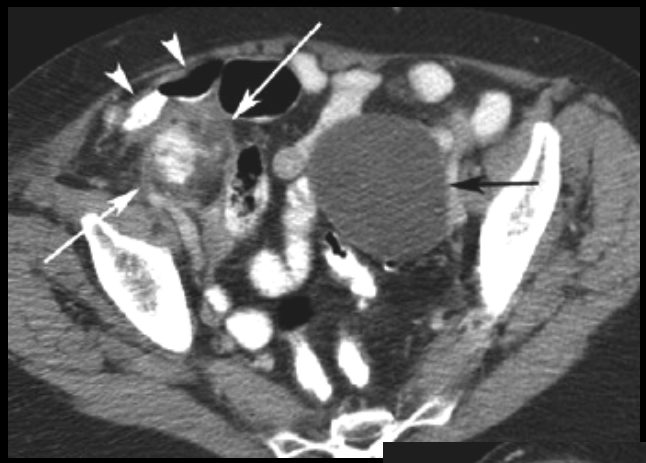
Quel est votre diagnostic

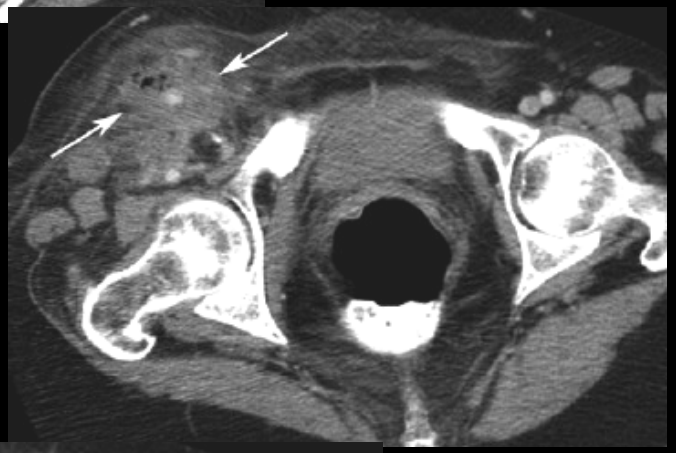
diverticulite caecale
adénocarcinome caecal infecté
autre…

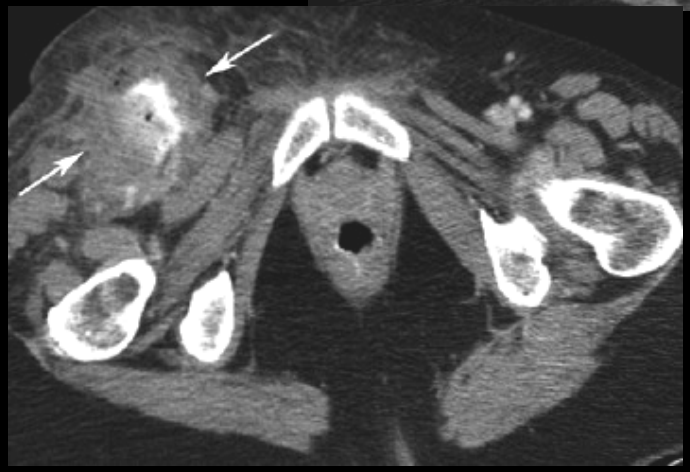
Pas d'image d'occlusion; la masse abcédée communique avec le tube digestif et en particulier avec la base du caecum .
L'hypothèse la plus vraisemblable est celle d'une appendicite herniaire

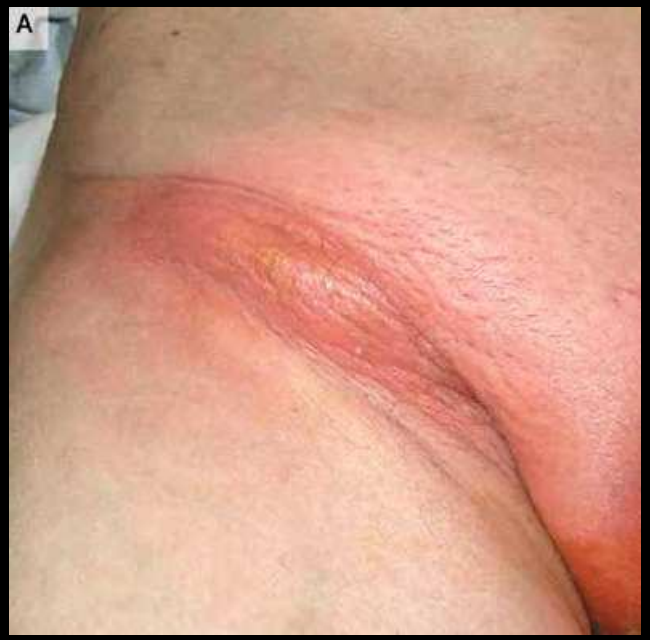
;mais il ne s'agit pas d'une hernie de Claudius Amyand puisque l'intestin ectopique est en avant du muscle pectiné et au contact du pédicule fémoral ; il s'agit donc d'une appendicite dans une hernie fémorale (ou crurale)

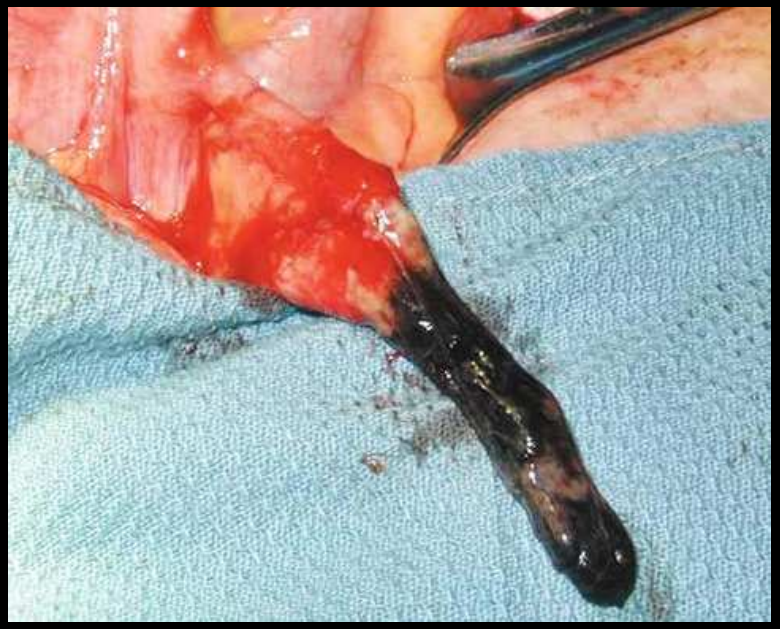
Comment s'appelle ce type de hernie











Hernie de de Garengeot

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IMAGES IN CLINICAL MEDICINE

De Garengeot's Hernia

Augustine Chung, B.A., and Amitabh Goel, M.D.

N Engl J Med 2009; 361:e18 | September 10, 2009

René-Jacques CROISSANT de GARENGEOT
Vitré (?) (Ille-et-Vilaine) 1688 / Cologne 10 décembre 1759
Chirurgien français, membre de la Société royale de Londres, et de l'Académie royale de chirurgie.
Le nom de Garengeot n'est guère resté que pour désigner une clef (davier) destinée à extraire les dents, dont il passe pour l'inventeur et qui porte son nom.

Les plus savants de nos collègues penseront également à l'entérocèle ou élytrocèle, hernie vaginale postérieure dont il a fait la première description complète, en 1736.

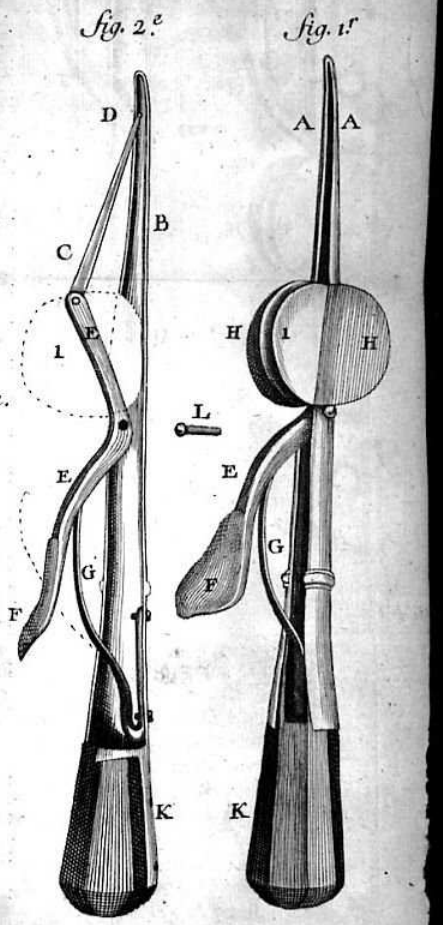
Il fut, comme Col de Vilars, médecin ordinaire du Roi au Châtelet, et à ce titre peut être considéré comme un très ancien prédécesseur des experts psychiatres judiciaires.

bistouri herniaire

fol. 2

Fig. 1.re Bistoury herniaire fermé
Fig 2.e Bistoury herniaire a demy ouvert, fendu suivant sa longueur, pour en faire voir la composition.

A La sonde creuse entiere et dans la quelle la lame est cachée.
B Moitié de la sonde suivant sa longueur
C La lame élevée hors de la sonde.
D Queüe d'aronde qui termine la lame et qui coulant dans deux rénures, empêche la pointe de la lame de sortir de la sonde.
E Tourniquet qui donne le mouvement a la lame.
F Plaque sur la quelle le pouce doit apuyer pour faire élever le talon de la lame.
G Ressort qui relève le talon du tourniquet pour faire rentrer le talon de la lame dans la sonde.
H Aisles qui deffendent et couvrent l'Intestin.
I Aisles qui soutiennent le tourniquet
K le manche du Bistoury
L la Vis sur la quelle joüe le tourniquet.



cure chirurgicale d'une hernie inguinale

Dessins de René –Jacques Croissant de Varangeot

RENÉ-JACQUES-CROISSANT

DE GARENGEOT

(Chirurgien-Anatomiste),

Démonstrateur royal aux écoles de Chirurgie

Membre de l'Académie royale de Médecine

de la Société royale de Londres &a.

Né à Vitré (Dépt d'Ille-et-Villaine) le 30 Juillet 1688.

Mort à Cologne le 10 Décembre 1759.

hernies éponymes..une conversation pas évidente à lancer dans un diner de sous-préfecture mais si ça veut bien fonctionner , ça peut faire fort ! ! !

Amyand's hernia *:The term Amyand's hernia refers to the presence of the appendix within the hernial sac, and has been variously defined as the occurrence of either an* ***inflammed or perforated appendix within an inguinal hernia****, or simply, the presence of a non-inflammed appendix within an irreducible inguinal hernia.*
The pathophysiology of Amyand's hernia is unknown. Weber et al [4], proposed that appendix in
hernia becomes inflamed as a result of repeated trauma,leading to adhesions and bacterial overgrowth.

Barth's hernia *:Hernia of the loops of intestine* ***between the serosa of the abdominal wall and that of a persistent vitelline duct.***

Beclard's hernia - femoral hernia through saphenous opening

Berger's hernia *- hernia in* ***Pouch of Douglas***

Bochdalek hernia *:(congenital* ***posterolateral hernia of the diaphragm****)A Bochdalek Hernia is one of two forms of a congenital diaphragmatic hernia, the other form being Morgagni's hernia.*
The foramen of Bochdalek is a 2cm x 3cm opening in the posterior aspect of the diaphragm in the foetus, through which the pleuroperitoneal canal communicates between the pleural and peritoneal cavities. This canal normally closes by the 8thweek of gestation, failure or incomplete fusion of the lateral (costal) with the posterior (crural) components of the diaphragm leads to the
development of Bochdalek hernia. Since the left canal closes later than the right, this type of hernia is found on the left side in 85% of cases

Cloquet's hernia *:****A femoral hernia perforating the aponeurosis of the pectineus*** *and insinuating itself between this aponeurosis and the muscle, lying therefore behind the femoral vessels.*

Cooper's hernia *(bilocular femoral hernia):* ***A femoral hernia with two sacs****, the first being in the femoral canal, and the second passing through a defect in the superficial fascia and appearing immediately beneath the skin.*

De Garengeot's hernia *: incarceration of the* ***vermiform appendix within a femoral hernia***

Gibbon's hernia *: hernia with hydrocoele*

Gruber's hernia *:**Internal mesogastric hernia**.*

Hesselbach's hernia *- hernia of a loop of intestine **through the cribriform fascia presenting lateral to femoral artery***

Hey's hernia *:encysted hernia, scrotal or oblique inguinal hernia in which the bowel, enveloped in its own proper sac, passes into the tunica vaginalis in such a way that the bowel has three coverings of peritoneum*

Holthouse hernia *:an inguinal hernia that has turned outward into the groin.*

Krönlein's hernia*: An inguinoproperitoneal hernia; a hernia that is partially inguinal and partly properitoneal.*

Larrey's hernia *= (Morgagni's hernia)*

Laugier's femoral hernia*- This is a type of **femoral hernia through a gap in the lacunar ligament**. It is more medial in position and nearly always strangulated.*

Littre's hernia *- hernia with **Meckels's Diverticulum***

lumbar hernia*: hernia in the lumbar region (not to be confused with a lumbar disc hernia), contains following entities:*

Petit's hernia *- hernia through **Petit's triangle (inferior lumbar triangle).***

Grynfeltt's hernia *- hernia through **Grynfeltt-Lesshaft triangle (superior lumbar triangle).***

Maydl's hernia *-(hernia-in-W) The hernia **contains two loops of bowel arranged like a 'W'**. The central loop of the 'W' lies free in the abdomen and is strangulated where as the two loops present in the sac are not.*

***Mesocolic / transmesenteric hernias**: occur through iatrogenically created defects in the mesentery. These defects include herniation of an abdominal viscus, usually through the small bowel mesentery or transverse mesocolon. These hernias are common following abdominal surgery, especially Roux-en-Y loop reconstruction, which creates a defect in the mesentery.*

***Morgagni hernia** (also known as **retrosternal or parasternal diaphragmatic hernia**) occurs due to the defective fusion of the septal transverses of the diaphragm and the costal arches. This anatomic defect lies posterolateral to the sternum and is called Larrey's space . The exact aetiology of this hernia is unknown but it is postulated that it begins as a weakness in the diaphragm which is later stretched due to intraperitoneal pressure.*

***Narath's femoral hernia** - The hernia lies hidden behind the femoral vessels. It occurs **only in patients with congenital hip dislocation** due to lateral displacement of the psoas muscle.*

***Pantaloon hernia**: a combined direct and indirect hernia, when the hernial sac protrudes on either side of the inferior epigastric vessels*

***Perineal hernia(Mery's hernia):** A perineal hernia protrudes **through the muscles and fascia of the perineal floor**. It may be primary but usually, is acquired following perineal prostatectomy, abdominoperineal resection of the rectum, or pelvic exenteration.*

Phantom hernia *- Localised muscle buldge following muscular paralysis*

Richter's hernia*:* ***strangulated hernia involving only one sidewall of the bowel****, which can result in bowel perforation through ischaemia without causing bowel obstruction or any of its warning signs.*

Rieux's hernia *:****retrocecal hernia****, protrusion of the intestine into a pouch behind the cecum.*

Rokitansky's hernia *:A separation of the muscular fibres of the bowel allowing protrusion of a sac of the mucous membrane.*

Serofini's hernia *- behind femoral vessels*

Spigelian hernia *- Spigelian hernia occurs through congenital or acquired defects in the spigelian fascia. This is the area of the transversus abdominis aponeurosis, lateral to the edge of the rectus muscle but medial to the spigelian line, which is the point of transition of the transversus abdominis muscle to its aponeurotic tendon.*

Treitz's hernia *is the eponymous name for a* ***paraduodenal hernia****. These are rare hernias that arise in the potential spaces and folds of the posterior parietal peritoneum adjacent to the ligament of Treitz.(duodenojejunal hernia)*

Velpeau hernia*: A velpeau hernia is a* ***femoral hernia in front of the femoral blood***

interrogation écrite sur cette passionnante énumération au prochain staff