Spontaneous Transomental Hernia Combined with Incarcerated Inguinal Hernia: A Case Report

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was attempted, and proceeded smoothly. We hospitalized the patient U er the procedure to observe her progress and considered elective definitive surgery for the inguinal hernia within several days. e following day, she remained stable, but nausea and abdominal distension persisted, and 42 hour U er the manual hernia repositioning she suddenly developed abdominal pain. Body temperature was 36.9°C; heart rate, 102 beats/min; respiratory rate, 20 breaths/min; and blood pressure, 118/83 mmHg. On physical examination, her abdomen was severely distended with tenderness; however; there was no recurrence of the incarcerated inguinal hernia. Laboratory results revealed leukocytopenia (4,300/mm³) and elevated levels of blood urea nitrogen (48.7 mg/dL), creatinine (0.84 mg/dL), and C-reactive protein (19.8 mg/dL).