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## 12. LAPAROSCOPIC INGUINO-SCROTAL HERNIA REPAIR COMBINED WITH CLASSIC HERNIA SAC REMOVAL

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**Background.** The most effective surgical technique in the pathology of inguinal hernia repair is unknown. The standard method for inguinal hernia repair had changed little over the time until the introduction of synthetic mesh. This mesh can be placed by either using an open approach or by using a minimal access laparoscopic technique. In the inguinal hernia treatment the laparoscopic approach has clear advantages, including less acute and chronic postoperative pain, smaller incisions, or earlier return to work.

Case report. 36 year old, male patient without any significant past medical or past surgical history, developed a giant inguino-scrotal hernia, whom we treated using a laparoscopic approach combined with open sac removal with the incision on the scrotum. The mesh was placed preperitoneal following the transabdominal preperitoneal procedure (TAPP). Due to the size of the hernia sac and difficult laparoscopic dissection, we made an incision on the scrotum and we practiced a transscrotal excision of the remaining sac. During the early postoperative period, intensive care treatment was not necessary and no complications were registered. The patient was discharged on postoperative day 3 in an excellent condition without any accusations. After a follow-up of 1 month neither hernia recurrence, nor chronic groin pain, nor sexual disorder were recorded.

**Conclusions.** Different approaches are possible. Open inguinal approach is commonly used in case of giant inguino-scrotal hernias but laparoscopic approach is not impossible. The transscrotal excision of the sac can prevent the formation of hydrocele and the technique can serve the benefits of the laparoscopic treatment in esthetic point of view.

**Key words:** inguino-scrotal hernia, transscrotal excision, laparoscopic hernia

## 13. POSTTRAUMATIC SPLENIC PSEUDOCYST

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**Background.** Posttraumatic splenic pseudocyst is a rare complication of splenic trauma. In the specialized anglo-saxon literature, the unique cases of formation of the posttraumatic splenic pseudocyst are described.

**Case report.** The 65-year-old female patient is admitted to the Emergency Medicine Institute of Chisinau, the Department of Surgery no.1, presenting abdominal pain in the left hypochondrium with ascending irradiation. From her personal history we note: 4 months ago she suffered a trauma by falling down in the mountains, falling from her own height on a stone