

#### 1412 De Garengeot's Hernia Complicated by Perforated Appendicitis and Groin Abscess: Report of A Rare Surgical Emergency

K. Singh, A. Abdelrahman, S. Abdalla

University Hospital Lewisham, London, United Kingdom

**Introduction:** De Garengeot's hernia is a rare subtype of femoral hernia which contains the vermiform appendix. Acute appendicitis in a femoral hernia is even more unusual, accounting for 0.08% - 0.13% of all cases of femoral hernias.

**Case presentation:** A 91-year-old woman was referred with a painful, cellulitic right groin mass. A computed tomography scan demonstrated a right-sided femoral hernia containing a loop of bowel and a collection in the right groin containing fluid and gas. The patient had early dementia but no other major medical co-morbidities. At surgery, she was found to have perforated appendicitis in a right femoral hernia. Most of the appendix and sac had fully disintegrated, forming a large abscess cavity beneath the skin in the right groin which extended down to the upper labia majora. The appendix tip was lying deep within the abscess cavity. A modified McEvedy approach was used to access the peritoneal cavity for the appendicectomy and sutured repair of the femoral neck. The groin abscess cavity was drained and managed with a negative pressure (VAC) dressing.

**Discussion:** De Garengeot's hernia is often difficult to diagnose pre-operatively and reporting of cross-sectional imaging may not always be reliable. Currently, there is no gold standard method for repairing these hernias. However, the modified McEvedy approach is well-described and is the preferred technique for emergent femoral hernia presentations. It provides sufficient access to manage both appendicitis and the femoral hernia. Adjuncts such as negative pressures dressings may be used to manage concomitant abscess cavities.