

77M history of cystectomy

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A large, stylized oak leaf graphic in a dark blue color, positioned on the left side of the slide. It features detailed vein patterns and a lobed edge.

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Richter hernia

Axial CT abdomen and pelvis with oral contrast demonstrates a small antimesenteric portion of a loop of small bowel lodged within a defect in the midline rectus musculature (arrow). There are no signs of bowel strangulation.



Richter Hernia

- A type of abdominal hernia in which only the antimesenteric portion of bowel is herniated
- Usually involves a small, firm defect in abdominal wall
- Most common locations: femoral ring, inguinal ring, prior incisions/trocar ports
- Complications: bowel infarction, enterocutaneous fistula

References

1. Steinke W, Zellweger R. Richter's hernia and Sir Frederick Treves: an original clinical experience, review, and historical overview. *Annals of surgery*. 232 (5): 710-8
2. Skandalakis PN, Zoras O, Skandalakis JE et-al. Richter hernia: surgical anatomy and technique of repair. *Am Surg*. 2006;72 (2): 180-4