34-year-old female with a nontender palpable right groin mass

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CT abdomen and pelvis with oral & IV contrast
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Right Femoral Hernia
Femoral Hernia

• Type of groin herniation caused by abdominal wall defect
• Much less common than inguinal hernias (comprises 2-4% of all groin hernias)
• Stereotypical patient: middle-aged to elderly female
• 4x more likely in females than males
• Twice as likely to be right-sided than left-sided
• Can be found incidentally in asymptomatic patients
• Symptomatic hernias can present with palpable lump at the top of the thigh, swelling, vague pelvic/groin discomfort; nausea, vomiting and pain usually only occur with strangulation
Femoral Hernia

- Protrusion of peritoneal contents through the femoral ring into the femoral canal
  - Posteroinferior to the inguinal ligament
  - Posterolateral to the pubic tubercle
  - Medial to the femoral vein (often causing compression of the femoral vein)
  - Inferior to the inferior epigastric vessels
- Hernia sac can contain omental fat or bowel
- Typically has a narrow funnel-shaped or pear-shaped neck
- Contrast-enhanced CT is generally considered the best imaging modality for definitive diagnosis
- Valsalva maneuver may help with identification and diagnosis on ultrasound
Femoral Hernia

Management

• Important to identify due to high risk of morbidity and mortality
  – Complications typically related to incarceration/bowel obstruction
  – 1% mortality rate for ages 70-79
  – 5% mortality rate for ages 80-90
• Can be challenging to diagnose clinically in obese patients
• For symptomatic femoral hernia or newly discovered asymptomatic femoral hernia, prompt surgical repair should be considered to avoid high risk of complications and mortality
  – Highest risk of complications of all groin hernias including incarceration and strangulation (25-40%), as well as increased mortality
  – No consensus on ideal approach (i.e., open vs. laparoscopic surgery)
  – Longstanding asymptomatic hernias sometimes can be managed conservatively depending on clinical context
References

https://radiopaedia.org/articles/femoral-hernia
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