Hernia

An abdominal wall hernia is a bulge of fat, other tissue, or organ through a weakened area in the abdominal musculature. Symptoms vary and may include discomfort, a mass, bowel obstruction, or redness of the abdominal wall. Some people may not have any symptoms. Abdominal wall hernias may be present from birth or may be caused by a medical examination or treatment, result from trauma, or result from increased pressure in the abdomen or pelvis.

For abdominal wall hernias, including umbilical, ventral (including spigelian), incisional (at prior surgery incision), and lumbar (in the lower back), usually appropriate imaging includes ultrasound abdomen, CT abdomen and pelvis with contrast, or CT abdomen and pelvis without contrast. MRI abdomen without and with contrast and MRI abdomen without contrast may also be appropriate.

For groin hernias, including inguinal and femoral, usually appropriate imaging includes ultrasound pelvis, MRI pelvis without and with contrast, CT abdomen and pelvis with contrast, CT abdomen and pelvis without contrast, CT pelvis with contrast, or CT pelvis without contrast. MRI pelvis without contrast may be appropriate.

For deep pelvis hernias, including obturator, sciatic, and perineal, usually appropriate imaging includes MRI pelvis without and with contrast, CT abdomen and pelvis with contrast, CT abdomen and pelvis without contrast, CT pelvic with contrast, and CT pelvic without contrast. MRI pelvis without contrast may be appropriate.

For diaphragmatic hernias (including traumatic, Bochdalek, and Morgagni), usually appropriate imaging includes CT chest and abdomen with contrast or CT chest and abdomen without contrast. Radiography chest, fluoroscopy upper gastrointestinal series, MRI chest and abdomen without and with contrast, and MRI chest and abdomen without contrast may be appropriate.

— By Natalie Skopicki and Nicola Schieda, MD. This information originally appeared in the Journal of the American College of Radiology.

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