ISSN: 2376-0249

Vol 4 • Iss 10 • 1000583 Oct, 2017

DOI: 10.4172/2376-0249.1000583

Clinical Image

Marked Abdominal Ascites with Supraumbilical Hernia

Madeeha Subhan1* and Waleed Sadiq2

¹Capital Hospital Islamabad, Pakistan ²Department of Medicine, Shifa International Hospital, Pakistan



Figure 1: Supraumbilical reducible hernia.

Clinical Image

A 58 year old male with supraumbilical reducible hernia, a year history of chronic liver disease presented to the outpatient department (Figure 1). He was diagnosed to be hepatitis C positive. On examination he had abdominal girth of 52 inches and it was reducible and cough impulse was positive. The hernia was 15 cm \times 15 cm. His PCR-HCV RNA showed a viral load of 2192297 copies/ml. His ultrasound showed liver to be coarse granular echo rich parenchymal texture with slightly irregular margins and portal vein to be dilated (1.3 cm). Moderate abdominal ascites with defect in the linea alba with protruding gut loops and ascitic fluid in the hernia sac. The defect measures about 5×5.6 cm. His platelet count was decreased to 76×103 /ul. Therapeutic paracentesis was done and mesh hernioplasty was done for hernia.

Final Diagnosis: Paraumbilical hernia due to ascites caused by hepatitis C.

Differential diagnosis: Malignancy, Tuberculosis, Lipoma.

*Corresponding author: Madeeha Subhan, Capital Hospital Islamabad, Pakistan, Tel: +92-51-9221334-9; E-mail: madeehas99@gmail.com

Citation: Subhan M, Sadiq W (2017) Marked Abdominal Ascites with Supraumbilical Hernia. Int J Clin Med Imaging 4: 583. doi:10.4172/2376-0249.1000583

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