Umbilical hernia in African children: Same attitude than that of inguinal hernia

Sir, The umbilical hernia is frequent pathology in the black child. It’s represents the second surgical.

Activity in our department following the pathology of peritoneo-vaginal canal. Unlike inguinal hernia of the child, it is considered to be benign according to Norden data.\(^1,2\) There will be no emergency for surgery since strangulation is unlikely. This stand by attitude needs another consideration in black children. However, strangulations and incarcerations are frequent in our practice. Between 1997 and 2000, we encounter 41 cases of strangulation on a total of 205 operated umbilical hernias in the Pediatric Surgery Department in Senegal. During that same period, on a total of 271 inguinal hernias 18 underwent surgery for strangulation. From 2001 to 2004, in the same department, 50 cases of strangulated umbilical hernias were noted on a total of 217 umbilical hernias whereas only 20 children presented with strangulated hernia on a total of 289 patients that underwent inguinal hernia repair during the same period. About 20% of umbilical hernias strangulate in Senegalese child, whereas this complication affects only 6% of inguinal hernias. This study reveals that umbilical hernia in children strangulated more often than inguinal hernia. Therefore, all umbilical hernia in black child must be operated. The same attitude is been adopted by many African authors.\(^3,4\) The main factor contributing to the strangulation are the age and the diameter of the aponevrotic umbilical defect. The mean age of the children who presented with strangulated umbilical hernia was 10 months with the extremes of 1 month to 13.5 years. Strangulation was therefore more frequent when the child is younger. Concerning the size of the umbilical defect, we noticed that children with a small defect were more exposed to hernia strangulation. About 80% of the children presenting with complication had a diameter of the aponevrotic defect less than 1.5 cm. The sex was not a determining factor to the occurrence of strangulation because there was almost equal number of males and females (49 males, 42 girls).

In conclusion, in the black child all umbilical hernia must be operated because of the frequency of evolutive accidents. The decision for surgery should be made more urgently as the child is small and the diameter of the aponevrotic defect is tiny.

REFERENCES

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