ВОЗРАСТНАЯ, СРАВНИТЕЛЬНАЯ АНАТОМИЯ ПАХОВЫХ ГРЫЖ

Лактионова В., Гранина Е.В.

Харьковский национальный медицинский университет

Кафедра анатомии человека

Харьков, Украина

INGUINAL HERNIAS AT COMPARATIVE ANATONY IN THE AGE ASPECT

Laktionova V., Granina E.V.

Kharkov National Medical University

Department of Human Anatomy

Kharkov, Ukraine

Inguinal hernias is 75% of all hernias. The 90-97% of men is patients with inguinal hernias.

Congenital inguinal hernias formations, if the processus vaginalis of the peritoneum is not completely overgrown and its cavity freely communicates with the peritoneal cavity. In this case, the processus vaginalis is a hernia sac. Congenital inguinal hernias make up the bulk of hernias in children (90%), but there are also adults (about 10-12%).

There are two forms in the acquired inguinal hernias: direct and oblique. Oblique inguinal hernia develops an oblique direction only in the initial stages of the disease. The inner opening of the inguinal canal extends medially with increasing hernia, pushing the epigastric vessels medially. Inguinal canal acquires a forward direction at the long-existing inguinal scrotal hernias and its surface hole is nearly flush with the inner bore. Scrotum greatly enlarges, the penis is hidden under the skin, and the contents of the hernia alone do not reduce into the abdominal cavity for large hernias.

Direct inguinal hernia comes from the abdominal cavity through the medial hole, thus makes a spectacle transverse fascia (the back wall of the inguinal canal).It is located near the root of the scrotum above the inguinal ligament in the form of a roundedstructure after going through the external opening of the inguinal canal. Transverse fascia prevents lowering of direct inguinal hernia in scrotum. Direct inguinal hernia is often bilateral.

Moving inguinal hernias occur when one party of the hernia sac is an authority partially covered by peritoneum, for example the bladder, cecum and ascending colon. They arise due to mechanical contraction peritoneum hernia sac adjacent to her bowel segmentsor bladder, which are deprived of serous cover. Moving hernias represents between 1-1.5% of all inguinal hernias.