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Acta Medica Iranica

2009;47(4) : 106-108

Defective anterior wall of inguinal canal and its role in the pathophysiology of direct inguinal hernias

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Abstract:

Regarding pathophysiology of direct inguinal hernias the following are pointed out: 1- Absence of contribution of fascia of transverses abdominis muscle along with fascia transversalis in making posterior wall of the inguinal canal causing defect point in Hesselbach's triangle. 2- Defects in protective mechanisms of the inguinal canal such as: i) shutter like effect of the arch of internal oblique and transverses abdominis muscles. ii) Sphincter like effect of fascia of oblique muscle (anterior wall of canal). During several years of observation and practice in the field of surgical repair of hernias, a new phenomenon was observed regarding the etiology of direct hernias. Evaluation of superficial ring and Ant. Wall of inguinal canal in 25 patients showed that the ant. Wall was not perfect and the defect was seen as a spectrum of moderate defect to complete absence of the wall. This phenomenon may be a newly observed mechanism in pathology of direct inguinal hernia that might help the operative repair. Taking this into account, i.e. repair of this defect, might help the classic herniorrhaphy techniques

Keywords:

[Inguinal hernia](#) , [Anterior wall defect](#) , [Superficial ring](#) , [Herniorrhaphy](#)

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