

# Sportsman's Hernia

A treatable entity



# What is a sportsman's hernia?



Probably:

- ◆ Conjoined tendon tear
- ◆ Transversalis tear



# Previous descriptions

- ◆ Gilmore's groin 1992:
  - ◆ groin disruption
    - ◆ Ext oblique
    - ◆ Conjoined tendon
    - ◆ Dehiscence inguinal ligament and conjoined tendon
  - ◆ Clinical diagnosis based on symptoms and physical findings

# Gilmore's groin

- ◆ Chronic pain in inguinal region-22w
- ◆ Often also adductor origin pain
- ◆ Onset gradual; 28% specific injury
- ◆ Dilated superficial inguinal ring, cough impulse and tenderness (only 75% tender) (?where)
- ◆ Associated adductor injury “refractory”

# Gilmore's groin

- ◆ Transversalis fascia plicated
- ◆ Conjoined tendon repaired
- ◆ Nylon darn- tendon to ligament
- ◆ External oblique repaired



# Other names

- ◆ Athletic hernia
- ◆ Sport's hernia
- ◆ Pubalgia
- ◆ Soccer players' groin
- ◆ Hockey groin syndrome

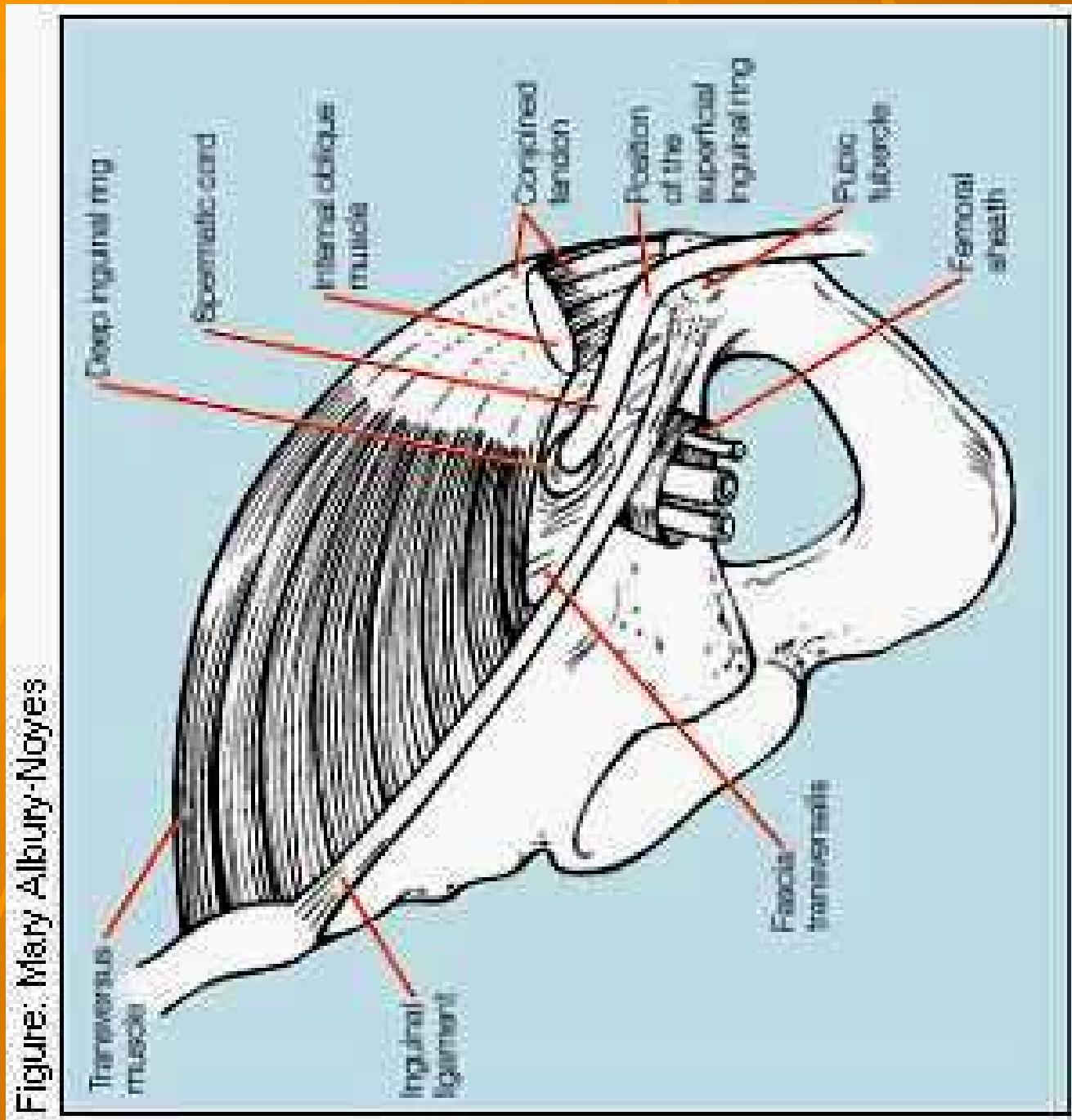
# Differential diagnosis

- ◆ Nerve entrapment
- ◆ Adductor strain
- ◆ Rectus abdominis strain
- ◆ Osteitis pubis
- ◆ Lumbosacral/hip/sacroiliac  
aetiologies

# Gary Stone criteria

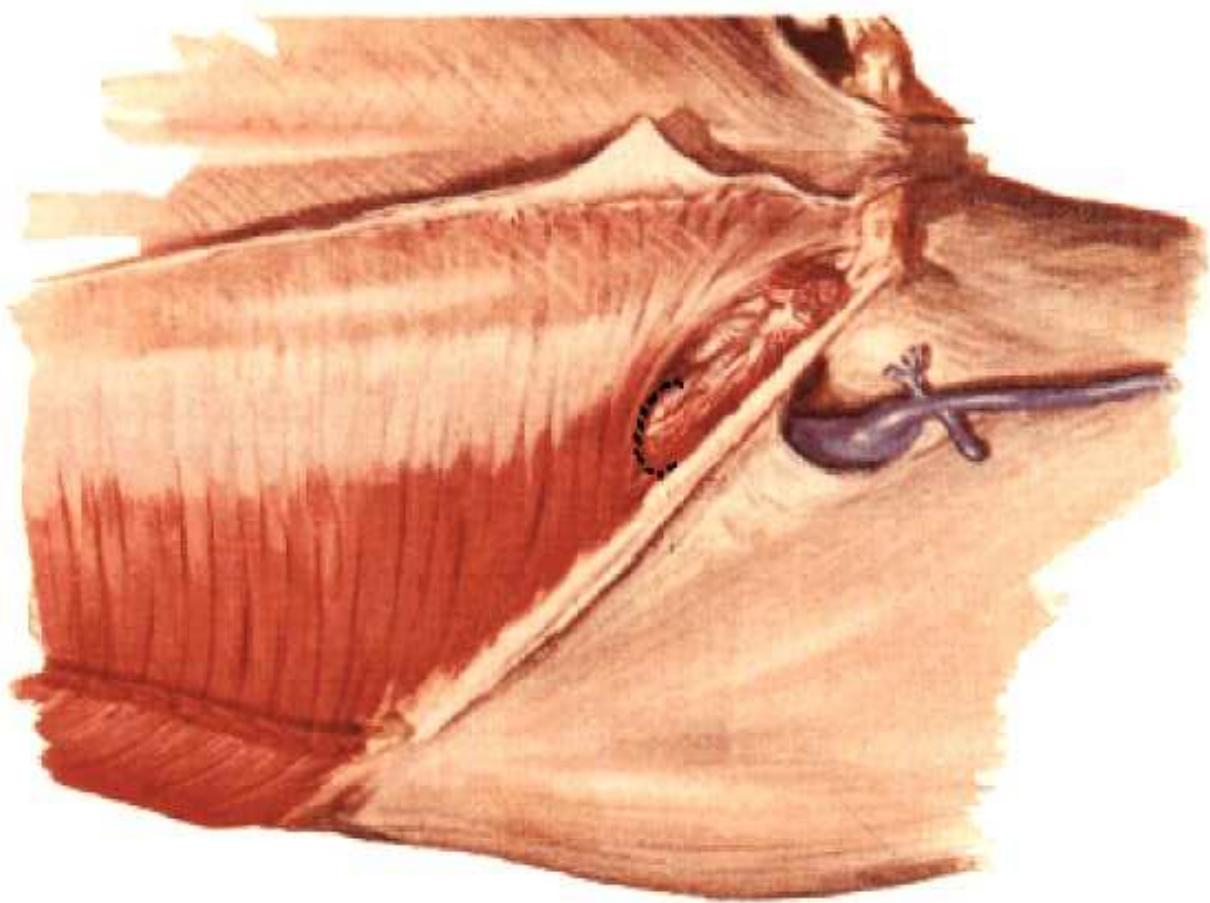
- ◆ Chronic inguinal pain (6 months)
- ◆ Other pathology excluded
- ◆ Refractory to other treatment
- ◆ Tender specifically over conjoined tendon
- ◆ Severe disruption to career/lifestyle

Figure: Mary Albury-Noyes



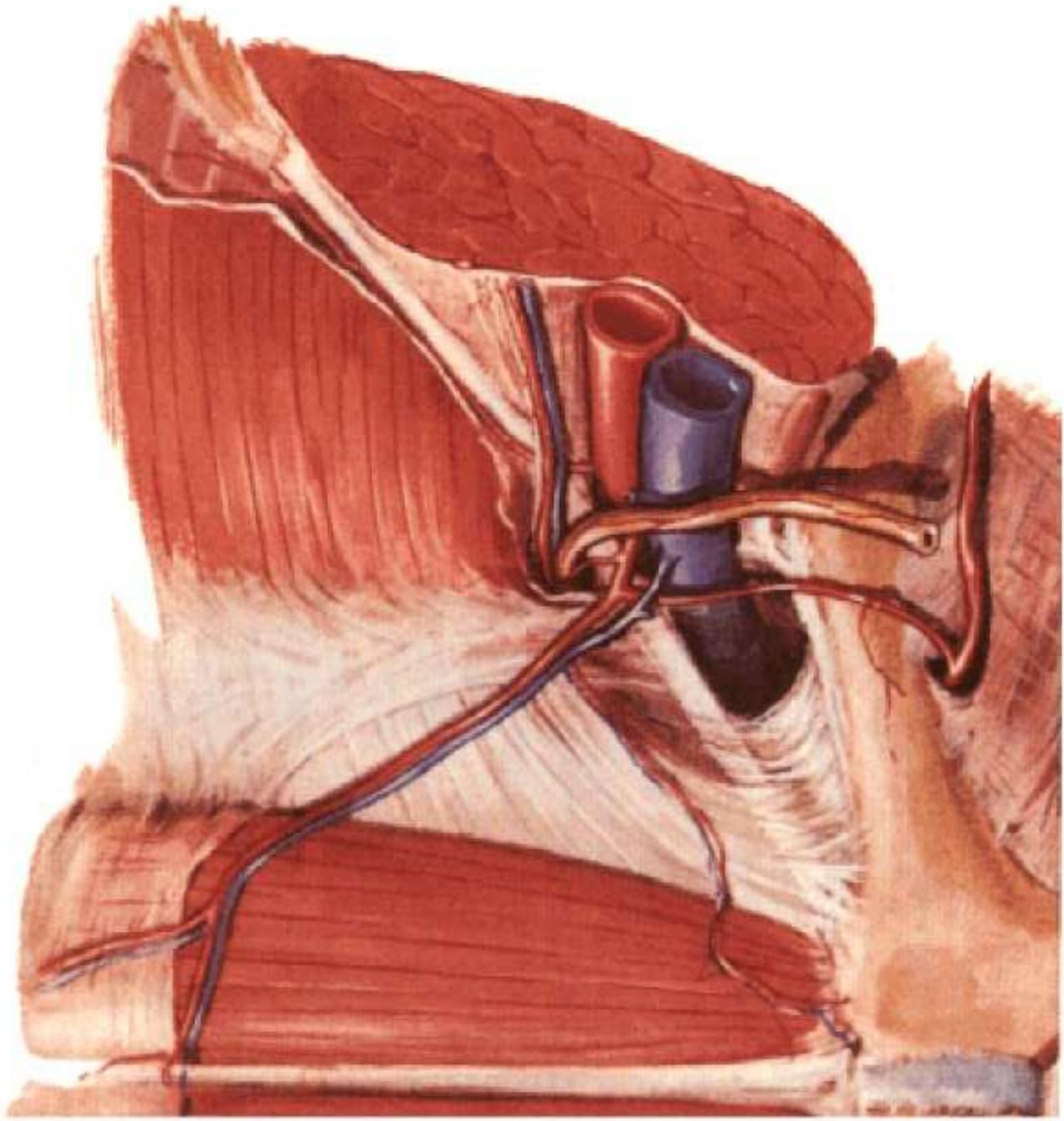
## Inguinal and Femoral Regions

Cribiform Fascia Removed



## Inguinal Region

Dissection - Posterior [Internal] View



# Investigations

- ◆ X-ray
- ◆ U/S
- ◆ Bone scan
- ◆ MRI
- ◆ Herniogram

# Laparoscopic repair sportsman's hernia

- ◆ 36 consecutive cases
- ◆ 1992-2005
- ◆ Laparoscopic inguinal hernioplasty
  - 2 transperitoneal
  - 34 extra-peritoneal

# Patient data

- ◆ All men
- ◆ Median age 33
- ◆ Referral sports medicine 29  
GP 7



# Presenting complaint

- ◆ Unilateral groin pain 24
- ◆ Bilateral groin pain 4
- ◆ Groin and other 4
- ◆ Groin and spreading 2
- ◆ Lower abdomen 2

*usually vague pain, but not at rest*

# Presenting complaint

- ◆ Sudden onset 22
- ◆ Sudden and gradual deterioration 5
- ◆ Gradual onset 9



# Activities precluded

✿ Running	14
✿ Coughing	10
✿ Walking	5
✿ Lifting	5
✿ Sport	5
✿ Turning over in bed	4

# Examination findings

◆ Conjoined tenderness	14
◆ Bilateral conjoined tenderness	6
◆ Conjoined and other	4
◆ Hasselbach's tenderness	2
◆ Bilateral Hasselbach's	2
◆ Cough impulse	2
◆ Internal ring tenderness	3

# Examination findings

- ◆ Unilateral tenderness 27
- ◆ Bilateral tenderness 9



# Length of history

- ◆ Median 3.5 months
- ◆ Mean 7.6 months



# Investigations

◆ X-ray	17
◆ Bone scan	15
◆ U/S	13
◆ MRI	4
◆ Nil	3

# Prior treatment

- ◆ Prednisone 7
- ◆ Physiotherapy 20
- ◆ Steroid injection 5
- ◆ Rest all

# Length of history

Time from injury to surgery

median

8 months

mean

10.1 months



# Sports

- ⚽ Soccer 10
- 🏉 Rugby 9
- 🏃 Running 5
- ⛳ Golf 2



# Hospital stay

Median

1 night



# Follow up

• Median	42 months
• Mean	43.1 months
• Range	1-120 months



# Operation findings

NIL	13
Small lipoma	8
Bulge	6
Moderate/large lipoma	4
Indirect sac	2
Contralateral indirect hernia	2

# Recovery

- ◆ Return to physical activity

median

1 week

- ◆ Return to sport



median

4 weeks

# Patient satisfaction

- ◆ Excellent 22
- ◆ Good 9
- ◆ No better, relapse 4
- ◆ Neutral 1



# Patient satisfaction

◆ Glad you had the operation?

Yes	32
No	3
neutral	1

# Long term pain levels

- ◆ No Pain 22
- ◆ A little pain 10
- ◆ Still in pain 4



# Subsequent treatment

- ◆ Further groin surgery 1
- ◆ Hip surgery 1
- ◆ One side relieved only 1
- ◆ Pain returned after 4 years 1
- ◆ Hamstring pain 1

# Complications

- ◆ Hydrocele 2
- ◆ Tack pain 2



# Further treatment

◆ Nil	23
◆ Physio	6
◆ Hip surgery	1
◆ Groin surgery	1
◆ Scan	1
◆ Steroid injection	1
◆ Hydrocele repair	1
◆ Further consultation	1
◆ Not known	1

# Treatment success

- ◆ Excellent/good 89%
- ◆ No better/relapse 11%

# Conclusions

- ◆ Successful, durable, efficient treatment for intractable chronic groin pain
- ◆ Last resort
- ◆ Careful informed consent
- ◆ Diagnose with sports medicine
- ◆ Beware associated pain, bilateral

