

### Images in clinical medicine (8)



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## A rare presentation of a giant umbilical hernia in a patient with liver cirrhosis and chronic hepatitis B

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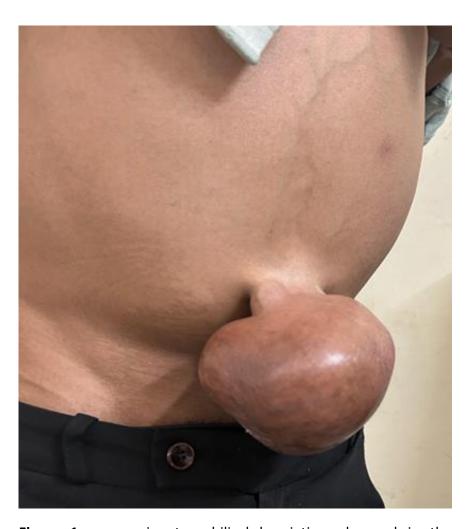
## **Article** 3



#### Image in medicine

An individual aged 24 presents to the clinic with symptoms of abdominal bloating, decreased appetite, and sporadic abdominal pain. According to a general examination, the patient is afebrile, with stable vital signs, including a normal heart rate and blood pressure, despite being somewhat ill. Currently, the patient is on the following medications: 20 ml of Lactulose Syrup Nocte, 300 mg of Tenofovir Disoproxil Fumarate tablet, OD, Lasilactone Tablet (Furosemide 20 mg + Spironolactone 50 mg) BD. He has a notable medical history of chronic hepatitis B infection,

portal hypertension, and liver cirrhosis. Additional signs of severe liver disease include palpable skin abnormalities close to the umbilicus and irreducible peripheral oedema. With a spot urine albumin of 3974.3 mg/L and creatinine of 198.97 mg/dL, recent laboratory tests revealed a very increased urine albumin-to-creatinine ratio of 1997 indicating severe proteinuria. mg/g, Computed tomography scan of abdomen and pelvis reveals gross free fluid in the abdomen and pelvis, along with the presence of mesenteric vascular congestion and haziness. Approximately one cm-sized defect is seen to be oozing into the hernial sac, which measures approximately 8.7x5.2 cm in size in the axial plane.



**Figure 1:** a prominent umbilical herniation observed in the orthostatic position