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Laparoscopic Treatment in Type IV Giant Paraesophagic Hernia and Intestinal Occlusion a Case Report, Surgical Technique.

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Highlights:

- The objective of this paper is to describe a patient undergoing with upper intestinal obstruction and a GPEH Type IV, approached laparoscopically.
- To describe actualized literature in GPEH and intestinal occlusion.
- Describe a technical difficult laparoscopic procedure.
- This paper adds to the literature a combined scenario of Giant hernia plus intestinal upper obstruction.
- Also we add, an actualized revision of literature.

Abstract: Introduction: A Giant Hiatal Paraesophageal Hernia (GPEH) is a Hiatal Hernia (HH) that includes more than 30% of the stomach in the thorax. The gold standard form of repair today is the laparoscopic abdominal approach in elective scenarios. Laparoscopic HH repair advantages include, less postoperative pain, small incisions, reduced postoperative respiratory complications are reduced, shorter hospital stay. The objective of this paper is to describe a patient undergoing with upper intestinal obstruction and a GPEH Type IV, approached laparoscopically.

Case presentation: We received a female patient 59 years old, she came with symptoms abdominal pain, emesis of intestinal characteristics and obstipation, with an evolution of 5 days. She also referred dyspnea; she went to another institution where made a CAT scan finding a GPEH. We decided to realize the procedure laparoscopically. We follow the principal objectives, reducing the hernia, dissecting al de hernia sac excision, Hiatal reparation with no mesh, and Nissen type fundoplication without Collis Gastroplasty. The patient stayed for seven days for surveillance and when the leukocyte and LDH went to a regular rate patient was discharged. With no complications with normal intestinal function and nearly no pain.

Discussion: We present a GPEH case associated with upper intestinal obstruction, with clinical findings that suggested ischemia. The approach of the treatment was abdominal laparoscopy.

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