To the Editor—We read with interest the article entitled “Peritoneal computed tomography: a diagnostic tool for genital oedema in patients on peritoneal dialysis” by Wan et al.1 We agree with the authors that computed tomography (CT) is a very good tool for the diagnosis of inguinal hernia. However, we cannot support the conclusion that a CT scan is the preferred diagnostic tool. In our hospital we use peritoneography with introduction of iodinated contrast (50 mL of Optiray 300; Tyco Healthcare, Sant Joan Despis, Spain) through the peritoneal catheter as the first imaging procedure for diagnosing peritoneal leaks.

A patient on peritoneal dialysis appeared in our emergency room with significant scrotal oedema. Peritoneal dialysis was stopped and haemodialysis was started. After that the oedema disappeared. Physical examination detected a left inguinal hernia, but because the patient complained of slight pain on the right side, peritoneography was performed. As the Figure shows, contrast was seen in both the peritoneum and the hernial sac.

It is important to consider the cost and availability of diagnostic procedures. In our centre, the CT scanner is usually too busy for minor investigations such as this one. Surgeons do not use imaging procedures to diagnose hernias before surgery in the general population. We recommend starting with peritoneography if a diagnostic tool is requested. Where the diagnosis is in doubt, CT can be used.

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Reference