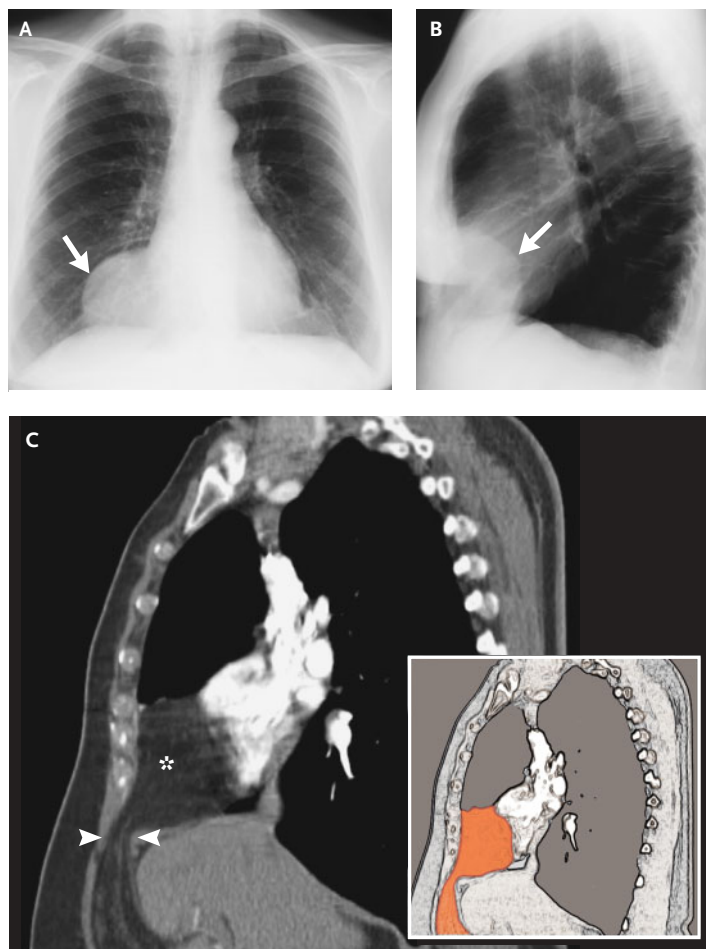


IMAGES IN CLINICAL MEDICINE

Morgagni's Hernia



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A 64-YEAR-OLD WOMAN WITHOUT SYMPTOMS UNDERWENT ROUTINE chest radiography, which revealed a well-circumscribed, low-density mass that measured 8 cm in diameter and rendered the right cardiophrenic angle opaque (Panel A, arrow). The lateral view identified the anterior position of the mass (Panel B, arrow). As part of the differential diagnosis, the possibility of a large pericardial fat pad or a Morgagni's hernia was considered; the presence of lymphoma or middle-lobe atelectasis was considered less probable. Contrast-enhanced, multislice computed tomography with parasagittal reconstruction identified a nonenhancing fatty tumor (Panel C, asterisk) with a connection to the mesenteric fat through a small defect in the antero-medial portion of the diaphragm (Panel C, arrowheads): a Morgagni's hernia.

Small congenital defects in the anterior diaphragm (i.e., Morgagni's foramina) may be filled with connective tissue and fat. The liver, bowel, or mesenteric fat may herniate directly through these defects, usually within the peritoneal sac (inset). The majority of hernias occur on the right side and are asymptomatic, although occasionally there is unspecific epigastric discomfort.

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