Introduction: Inguinal bladder hernia is a rare occurrence with a reported incidence of 1 – 4%. Additionally, the presence of bladder carcinoma within a herniated portion of the bladder is exceedingly rare.

Case Presentation: Herein we report a case of a patient with an inguino-vesical hernia and a rare occurrence of bladder tumour within. The patient presented with a history of gross haematuria, which was further investigated with ultrasound and cystoscopy. Transurethral resection of bladder tumour was attempted however the location of the tumour made it impossible to reach via this route, thus flexible cystoscopy and biopsy were done. Histopathology and immunohistochemistry confirmed the nature of the tumour which is a subtype of mucinous adenocarcinoma. A complete staging computed tomography scan was performed showing a left inguino-vesical hernia with localized bladder carcinoma.

Discussion: The majority of bladder cancer cases are urothelial carcinoma accounting for 90 – 95%. Bladder adenocarcinoma represents 0.5 to 2% of all malignant bladder tumours with aggressive behaviour and poor response to oncology treatment. The symptoms are similar to those of other bladder tumours but it is important to investigate another source of cancer since this type of tumour is extremely rare as a primary lesion. Surgery resection remains the main therapeutic and curative option.

Conclusion: The prognosis of mucinous bladder adenocarcinoma depends mainly on its stage when it is diagnosed and treated. Due to the rarity of this tumour, and
the relative lack of case reports, in this review we are discussing the risk factors, presentation and management of a patient with mucinous adenocarcinoma of the bladder within an inguino-vesical hernia.