

No difference in sexual dysfunction after transabdominal preperitoneal (TAPP) approach for inguinal hernia with fibrin sealant or tacks for mesh fixation.

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Abstract:

Background: Postoperative sexual dysfunction in relation to laparoscopic groin hernia surgery may be related to methods of mesh fixation. However, this has not been investigated earlier. Moreover, results regarding sexual dysfunction in females have not been reported systematically. The aim of this study was to compare fibrin sealant versus tacks for fixation of mesh regarding sexual dysfunction in males and females. Methods: Using the Danish Hernia Database, patients operated laparoscopically for groin hernia with a transabdominal preperitoneal (TAPP) procedure with fibrin sealant or tacks for mesh fixation were sent a questionnaire regarding sexual dysfunction. Sexually active patients without recurrence were evaluated in this study. Results: Pain during sexual activity was present in 115 of 1019 (11.3 %) males and 17 of 147 (11.6 %) females. There was no difference between fibrin sealant and tacks for mesh fixation and no difference between genders. Pain intensity, characteristics and origin were comparable between fibrin sealant and tacks for both genders. We found a relationship between a higher rate of sexual dysfunction and lower age for both genders. Conclusion: We found no difference between fibrin sealant and tacks in pain during sexual activity or intensity of pain. However, younger age may be a risk factor for pain during sexual activity. Considering the high rate of postoperative sexual dysfunction, it is important to include this topic in the preoperative patient information.

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