

TAPP hernia repair with 3D mesh and fibrin-glue.

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Abstract:

Background: since the introduction of TAPP technique for laparoscopic hernia repair, there is a continuous concern about meshes that are easy to be applied and also decrease the incidence of reoccurrence. Fibrin-glue is proved to decrease postoperative chronic pain syndrome that can appear secondary to tacks, even the resorbable ones. Aims: to investigate the benefits of 3D mesh (both from the surgical technique point of view and reoccurrences) and fibrin-glue as fixation tool. Material and Method: we present the first part of a prospective ongoing study, started in 2012, containing 34 patients Results: out of the 34 operations, three were performed in emergency conditions, for incarcerated hernias. Bowel movements started after an average of 1,14 days (for gases) and 2,57 days for stool. GIQLI score (Gastro Intestinal Quality of Life Index) had a median value of 11,42 reported at a maximum value of 144. Duration of the operation was between 55-130 min with a median value of 85 min. Conclusion: anatomically shaped mesh allows an easier application making the surgical technique more facil. Fibrin glue, applied with its laparoscopic special device doesn't seem to be at the origin of any postoperative chronic pain.