P035 EMERGENCY BILATERAL GORIN HERNIA REPAIR IN UNILATERAL COMPLICATED INGUINAL HERNIA REPAIR WITH CONTRALATERAL HERNIA. COHORTS COMPARATIVE OUTCOMES ANALYSIS USING PROPENSITY SCORE MATCHING

Aim: Aim of our study was to analyze outcomes and safety of bilateral inguinal hernia repair in unilateral groin complicated hernia with contralateral groin hernia.

Material and Methods: Retrospective cohorts study following STROBE statements on a prospective Emergency Surgery Department database. Inclusion criteria were: patients with emergency hernia repair from 2008 to 2018, 18 years old. Unilateral or bilateral inguinal hernia repair without other abdominal wall hernia repairs. Comparative analysis between two group unilateral hernia repair (UH) vs bilateral hernia repair (BH) those patients with unilateral complicated inguinal hernia with contralateral inguinal hernia. Propensity score matching (PSM) between groups was performed to eliminate statistically groups differences. Outcomes between groups were analyzed with special attention to postoperative morbimortality and hernia recurrence.

Results: 341 patients were included, 38(11.1%) were performed bilateral hernia repair. Groups differences were: higher rate of inguinocrural inguinal hernia (36.8 vs 22.8), prophylactic antibiotics use (94.7 vs 81.8) and general Anesthesia use (52.6% vs 50.2%). General high rates of morbidity and mortality were observed (5.9% and 41.9) and 22 (6.5%) hernia repair recurrence were detected. After PSM no differences between surgery outcomes groups were observed with similar morbidity, recurrence or hospital stay.

Conclusions: Emergency inguinal hernia repair has high morbidity and mortality rates in our experience. Emergency bilateral inguinal hernia repair in context of hernia complication seems safe without recurrence or hospital stay increase.