P062 IMPLEMENTATION OF ETEP (EXTENDED TOTALLY EXTRAPERITONEAL REPAIR) AS A NEW METHOD OF INCISIONAL HERNIA REPAIR

Krzysztof Nowakowski1, Ayman Waly Elkalash2, thomas lahaye3
1Roteskreuzkrankenhaus, Klinik für Allgemein- und Viszeralchirurgie, Bremen, Germany, 2Rotes Kreuz Krankenhaus, Klinik für Allgemein- und Viszeralchirurgie, Bremen, Germany, 3Roteskreuzkrankenhaus, Germany

Aim: To assess the outcomes of implementation of extended Totally Extraperitoneal Repair (eTEP) for incisional hernia in our clinic.

Material and Methods: In our clinic abdominal wall hernias are predominantly repaired in eMILOS (endoscopic Mini or Less Open Sublay)- technique. However, we hoped for advantages in repairing incisional hernias in eTEP-technique. From 19.09.2019 till 28.04.2021 there were 13 patients with incisional hernias included to be operated in eTEP-technique.

Results: Among 13 patients, mean age was 64,6 years (range 47 – 78 years), 7 females (54%) and 6 males (46%). Average diameter of the hernia was 6,46 cm (range 2 – 14 cm). The mean Body Mass Index of the patients was 29,41 kg/m² (range 18,4 – 48,76 kg/m²). The mean duration of the operation was 162,38 minutes (range 106 – 237 minutes). The mean surface of the mesh was 612 cm² (range 225 – 1200 cm²). Hospital stay lasted mean of 5,8 days (range 2 – 28 days). We observed one post-operative complication as a lung artery embolism occurred in one patient with preperitoneal haematoma due to needed anticoagulation. Till today we have not observed any recurrence.

Conclusions: Our study shows that a new method of incisional hernia repair with mesh placement can be a safely implemented and may have advantages comparing with other laparoscopic methods. It has low complication rate, shows good cosmetic results and is cost effective.