Aim: To demonstrate how minimally invasive surgery of the abdominal wall allows us to rescue patients with recurrent hernias previously treated with other laparoscopic techniques.

Material and Methods: An 83-year-old woman with moderate comorbidities, ASA III and obese was operated for bilateral Spiegel’s hernia by laparoscopic IPOM. 21 months later, a symptomatic recurrence of the right hernia was diagnosed.

The physical examination was difficult due to obesity and the CT scan showed a right hernia recurrence. This CT scan was used for 3D Planning of the surgery, showing the right Spiegel’s hernia with 5-6 cm of diameter with a bowel loop inside.

Results: Given the age of the patient and comorbidities, it was decided to perform a laparoscopic repair using the IPOM + technique, closing the defect with barbed suture and placing a wide visceral contact mesh fixed with absorbable tackers.

She was discharged 24 hours after surgery without complications, providing the patient with the benefits of minimally invasive surgery.

Conclusions: Laparoscopic surgery allows us to treat hernia recurrences even in cases previously treated by minimally invasive approach.
An individualized treatment adjusted to the age and characteristics of each patient should be carried out. 3D Technology and reconstruction is very useful for pre-surgical Planning, allowing a personalized pre-operative assessment of each patient. The use of 3D Technology is a great teaching tool with great potential for surgical planning.