P159  PARTIAL VS COMPLETE MESH REMOVAL AFTER CROHNIC MESH INFECTION: COMPARISON OF OUTCOMES

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Aim: “The purpose of this study is to compare the postoperative outcomes between partial mesh removal (PM) and complete mesh removal (CM) due to chronic mesh infection.”

Material and Methods: “Patients with mesh removal due to chronic mesh infection were included from February 2010 to May 2020. The patients were consequently assigned depending on the surgical technique to either partial or complete mesh removal. The demographic, operative and follow-up data of the two groups were analyzed and compared in terms of surgical site occurrence (SSI), surgical site infection (SSI), overall complications following Clavien-Dindo classification and relapse of mesh infection at 1 year follow-up.”

Results: “The study included 65 patients (44.61% males) intervened of mesh explantation. MThe patients were assigned to PM 56.92% (n = 37) and CM 43.08% (n = 28). 27% of the patient in the CM group needed a new mesh vs. 7.1 % of PM p = 0.039 (4.38 OR 1.02-24.1). There were no statistically significant differences with respect to length of hospital stay CM 5.46 (DS 6.1) vs 5.82 (DS 10.09) days, p = 0.409. SSI were 84.4%, p = 0.631, while SSI was 61.2%. There were no differences in terms of Clavien-Dindo (p = 0.617). The appearance of new chronic mesh infection after surgery were: CM 29.7% vs PM 39.3%, p = 0.420.”

Conclusions: “Postoperative morbidity after mesh explants is comparable between partial and total explants. Those cases in which a total explant is performed are more likely to require the placement of a new mesh, while in partial explan there is a higher percentage of recurrence of chronic infection.”