LAPAROSCOPIC TREATMENT OF UMBILICAL HERNIA WITH A COMPOSITE MESH: A MONOCENTRIC EXPERIENCE

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INTRODUCTION

Umbilical Hernia is a common ventral hernia in adult population. Classical approach was represented by open repair, but during recent years laparoscopic treatment is increasingly adopted and it can present some intraoperative and post-operative advantages.

MATERIALS AND METHODS

We retrospectively analysed 31 laparoscopic primary and incisional umbilical hernia repairs performed between 1 January 2018 to 1 January 2020. We collected data concerning age, sex, hernia defect size, operative time and complications according Clavien-Dindo Classification, recurrence at 6 months and 1 year follow up.

RESULTS

We performed laparoscopic umbilical hernia repairs in 31 patients (22 males, 9 females); mean age 52.1year-old (range 30-82 y.o.). Mean defect size was 4.5 cm (3 - 6.8 cm). All procedures were performed under general anaesthesia with laryngeal mask and with 5mm trocars and optic and under pneumoperitoneum pressure set until 10-11 mmHg as maximum value. In all cases we applied a macroporous composite prosthesis (UCMC - Umbilical Clear Mesh Composite – DIPROMED srl – San Mauro Torinese, Turin, Italy) and we performed an open closure of fascia with adsorbable stitches. Mean Operative time: 40 minutes (30-65 min.). Complications reported according Clavien Dindo: grade I in 3 cases, grade II in 2 cases, grade III in 1 case. Recurrent hernia was detected in1 case at 6 months follow-up.

CONCLUSIONS

Laparoscopic treatment of umbilical hernia is a safe and feasible procedure; indeed, we consider reducing hernia from abdominal cavity generally better than open approach and composite mesh positioning with direct fascial closure usually allows a satisfying repair of defect.

A role of a new macroporous composite mesh (UCMC – Dipromed srl - figure 1) that reduce intrabdominal adhesions and a low level of curarization because of laryngeal mask, were fundamental to our satisfying results. The creation of a national and international registry for laparoscopic treatment of umbilical and other ventral hernias is our intention because we consider that further investigations on more significative samples are necessary.

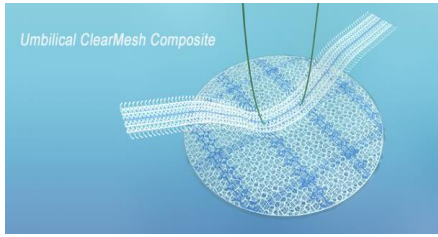


Figure 1