TOTAL EXTRAPERITONEAL (TEP) VERSUS TRANSABDOMINAL PREPERITONEAL(TAPP) REPAIR AMONG PATIENTS OF INGUINAL HERNIA IN TERTIARY CARE CENTER: A RANDOMISED CONTROL TRIAL

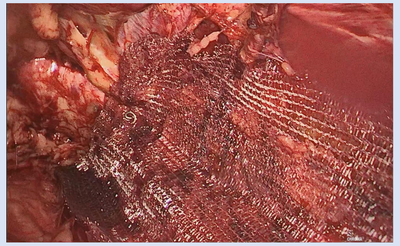
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Introduction

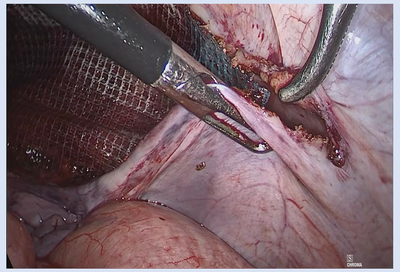
Laparoscopic inguinal hernia repair is commonly done by Total extra peritoneal repair (TEP) and Transabdominal preperitoneal repair (TAPP). Both procedures have differences in approach and learning curves. It is important to establish the clinical effectiveness and efficiency of the procedures. In this study, we aim to compare various intra-operative and post-operative outcomes of TEP vs TAPP in patients with inguinal hernia.

Material and Method

A randomised control study of 3-year duration at a tertiary care teaching hospital where total 138 patients of inguinal hernia underwent either TEP or TAPP. The enrolled patients were alternatively randomised and operated after which they were compared in terms of various intra-operative & postoperative parameters. Early postoperative findings, return to activities, duration of hospital stay, and post-operative complications were assessed.



Showing right sided inguinal hernia repair with a prosthetic mesh (Total extra peritoneal hernia repair)



Showing Left inguinal hernia repair with prosthetic mesh in Trans Abdominal Pre Peritoneal (TAPP) approach

Results

There were 68 patients in TEP group and 70 in TAPP group. TEP was associated with lower morbidity as compared to TAPP. Various parameters like duration of surgery, intraoperative blood loss, postoperative pain were seen significantly less in TEP as compared to TAPP. There was no need for conversion to open or any adverse intraoperative events noted in both the groups. Local complications and early recurrence was assessed. There was no surgical site infection. Average duration of stay was 3.6 days for TEP and 4.7 days in TAPP..

PARAMETERS	TEP	TAPP
• Postoperative pain	Less	
• Duration of surgery	Less	
• Intraoperative blood loss	Less	
• Cord edema	11 patients	14 patients
• Hospital stay	3.6 days	4.7 days
• Recurrence	No	No

Conclusion

TEP Offered advantages over TAPP in terms of reductions in operating time, operative morbidity, post-operative complications and hospital stay.

References

1. Rambhia SU, Modi R. A comparative study between totally extraperitoneal and transabdominal preperitoneal laparoscopic inguinal hernia repair techniques. International Surgery Journal. 2017 Jan 25;4(2):663-70.
2. Choksi D, Parmar A, Raiyani G, Prasad G. Comparative prospective study of laparoscopic TEP repair versus laparoscopic TAPP repair for inguinal hernioplasty conducted at tertiary level hospital, Vadodara. Int J Res Med. 2014;3(1):17-9.