Why Do I See Everyone Else's Recurrent Hernias? Patterns of Care for Persons With Recurrent Ventral Hernia

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Background

Objective: To evaluate the proportion of patients with recurrent hernias who return to their original surgery for re-operation.

- Hernia recurrence is common and morbid.
- Anecdotally, surgeons often see recurrences from other surgeons rather than themselves.
- Patients' choice and patient factors influencing choice of surgeon for recurrent hernia repair is unexplored.
- Possible factors influencing surgeon choice:
  - Surgical outcomes.
  - Access to care.
  - Patient satisfaction.
- Understanding surgeon preference patterns can improve:
  - Continuity of care.
  - Evaluation of surgeon and healthcare system performance.
  - Patient-centered approaches to long term care and follow up.

Methods

Retrospective study using 100% fee-for-service Medicare claims data from 2011-2021.

Population: Adults 18 and older who underwent both primary abdominal wall hernia repair and a recurrent hernia repair.

Analysis: Multivariable logistic regression controlling for demographics, comorbidities, and surgical factors.

Outcome: Likelihood of returning to the same surgeon for recurrent hernia repair, based on different patient factors.



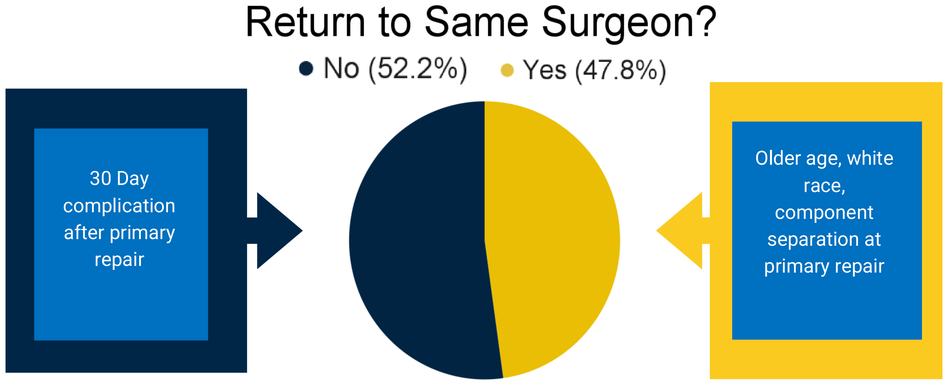
Results

Overview:

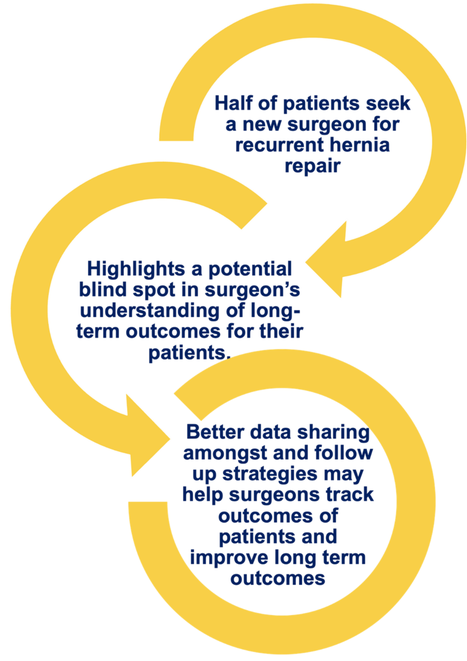
- Of 262,400 patients, 10% (26,639) experienced hernia operative recurrence within 10 years.
- 52.2% (13,905) of patients had their recurrence fixed by a different surgeon than the surgeon who performed the index repair.

Patient factors associated with return to the same surgeon:

- Older age (aOR 1.01, CI 1.00-1.01, p<0.001).
- White race (aOR 1.11, CI 1.03-1.20, p<0.01).
- Component separation at primary repair (aOR 1.44, CI 1.31-1.59, p<0.001).
- 30 day complication after primary repair (aOR 0.90, CI 0.85-0.95, p<0.001).



Takeaways



Acknowledgements

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