



Hernia Repair 2010

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Personal Experience in Hernia Repair with Lightweight Mesh and Fibrin Glue

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Aim: The implant of synthetic prosthesis and the use of local anesthesia have radically changed the habits in inguinal hernia repair. The recent use of lightweight polypropylene mesh fixed to the tissues by biological fibrin glue shows comparable results to other techniques, with a better quality of life for the patient.

Methods: A pilot study of 210 patients (195 males and 15 females) aged 31 and 86 years (average age 58 years), surgery performed between June 2007 and June 2009 using the tension-free suture less technique, under local anesthesia and peripheral block. The mesh used is a light weight polypropylene and fixed by biological fibrin glue spray and 1/100 of elements of human thrombin (5u/ml).

Results: The first results of this already running study with a not yet completed follow up for all patients, shows a remission rate over 98%, similar to standard Trabucco technique(tension-free sutureless) with polypropylene mesh. The use of light weight mesh allows a better colonization and tissue integration, while the glue avoids the dislocation of the mesh itself in a better way than a classical suture in Lichtenstein technique. The complications are reduced, haematomas from 0.3% to 0.2%, sieromi (after an initial increasing due to the excess of glue used or wrong distribution of the spray over the mesh) from 12% to 8 %, infections are reduced too and we have seen absence of chronic pain (rated according to VAS scale with 30 to 365 days not yet completed follow-up).

Conclusions: The glue is a biological, not inert material with adhesive and haemostatic activity, biostimulating for the regenerative process. It allows the atraumatic prosthesis fixation reducing at the same time the dead space around it. The minimal prosthesis concept with keywords of light weight, better physiological tensile strength and rarefied texture, gives Surgeons the chance for a customization of treatment in specific patients