Simultaneous TAPP inguinal repair and laparoscopic cholecystectomy results of a case series

Abstract

Background Cholecystectomy and inguinal hernioplasty are the most frequent surgeries in Chile and the world. Laparoscopic inguinal hernioplasty, being a clean surgery, reports mesh infection rates of less than 2% and adding a simultaneous laparoscopic cholecystectomy is controversial due to an increase in the risk of mesh infection. The aim of this paper is to report the results of simultaneous TAPP hernioplasty with laparoscopic cholecystectomy. Method Retrospective analysis of the digestive surgery database. We identified cases in which laparoscopic inguinal TAPP repair and simultaneous laparoscopic cholecystectomy were performed. Demographic, clinical information, hernia type and size, data from the surgery and its complications were also retrieved and analyzed. Results We identified 21 patients, 86% male and with an average age of 61 years range 46–84. 72% of the hernias were unilateral, predominating indirect 50%, direct 28% and the remaining were femoral and mixed. The average hernia size was 2.2 cm. The meshes used were 56% polypropylene, 37% polyester and 5% PVDF. We report one gallblader perforation. At a median time of 40 months of follow-up (range 4–89 months), one hernia recurrence was found (3.7%), there were no reoperations at the time of the interview and there were no cases of mesh infection. Complications of surgery includes one ipsilateral testicular atrophy 4.8% and 1 ipsilateral inguinal seroma 4.8%. Conclusions In this series of cases, adding clean contaminated surgery to the inguinal TAPP hernioplasty was not associated with an increase in the infection of the mesh..

Keywords