

## Initial experience with self gripping-mesh in TAPP in local hospital

Nemanja Đurica, Milica Kalkan, Minja Stojanović and Dragoljub Gvozdenović

Department of surgery, General hospital Pančevo, Serbia



Општа БОЛНИЦА Панчево



### Introduction:

Chronic pain after inguinal hernia repair remains a problem. Regarding laparoscopic approach there are novel techniques and devices which reduce chronic pain, like absorbable tackers, self-gripping meshes and glue.

### Aim:

The purpose of this study is to present our initial experience using self gripping mesh in laparoscopic inguinal hernioplasty in our hospital.

### Material&Methods:

It is a retrospective observational study including all patients who underwent a laparoscopic hernia repair with self-gripping mesh in our hospital between January 2024 and July 2024.

### Results:

During these 6 months we operated on 10 patients using self-gripping mesh (ProGrip™ Medtronic). 8 patients were male and 2 were female. Mean age was  $47 \pm 15,5$  years. There were 5 patients with right sided hernia, 3 with left sided hernia and 2 with bilateral hernia. All patients had primary hernia. ASA 2 was the most frequent score (60%). Average operative time was 54 minutes. Average VAS pain scale score on POD 1 was 2,3. EuraHS scale showed significant decrease in pain 1 month after surgery (average preoperative EuraHS was 32,4 while 1 month after surgery average EuraHS score was 3,1) Regarding complications, seroma was observed in 1 patient and haemathoma in 1 patient. During the 6 months follow-up there were no recurrences or cases of chronic pain.



### Conclusions:

Our opinion is that self-gripping mesh is good choice for reducing chronic pain. Mesh placement is easy and mesh adheres firmly. It requires a bit of practice in the beginning, but after few cases it becomes routine.