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INGUINAL HERNIA

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Retrospective Analysis of MIS Versus Open Scrotal Hernioplasty: A Comparative Study

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INTRODUCTION

- Inguinoscrotal hernias represent a surgical challenge due to its higher morbidity, technical complexity, and risk of complications.
- Recent guidelines from the European Hernia Society (EHS) acknowledge that minimally invasive techniques can be performed safely by experienced surgeons.
- In this context, it is essential to compare both surgical strategies in order to optimize the treatment of this uncommon but clinically significant condition

AIM

To evaluate and compare clinical outcomes, complication rates, and post-operative recovery profiles betweenn minimally invasive inquinoscrotal hernioplasty and the open technique.

MATERIAL & METHODS

- Retrospective, multicentric study. including patients inguinoscrotal hernioplasty between January 2020 December 2023.
- Were divided into two groups based on the surgical approach: laparoscopic (LA) and open (OA).
- Demographics variables, hernia characteristics, operative time, postoperative hospital stay, complications, and recurrence rates.
- Inclusion criteria were adult males aged >18 years with scrotal hernias classified as H3-4 according to the Kingsnorth classification. Emergency surgeries were excluded.

RESULTS

- patients were included, undergoing laparoscopic hernioplasty and 220 undergoing open surgery.
- The laparoscopic group (LA) had more comorbidities (95,8 vs 69.5% ;p=0.03) a longer mean operative time (76 vs. 145 minutes) and similar hospital stays (1.5 vs. 1.6 days).
- LA group associated higher ventral hernia repair (33.3)VS p=0.001).
- Complication rates were similar with higher Clavien dindo score in OA group.
- At a 12- month follow-up, LA had only 1 (4.2%) hernia recurrence while 14 (6,4%) in OA group.

CONCLUSIONS

- Laparoscopic inguinoscrotal hernioplasty offer significant advantages over the Open approach. It is associated with shorter recovery times, comparable recurrence rates, and similar hospital stays.
- Laparoscopic techniques show particular benefits in the management of inguinoscrotal hernias in more complex patients.
- Also facilitates the performance of additional procedures optimizing surgical treatment and reducing the need for a second approach or intervention
- These findings support the use of laparoscopy in inguinoscrotal hernia repair, especially in centers with expertise in abdominal wall surgery.