

EXTENDED TOTALLY EXTRAPERITONEAL (ETEP) APPROACH FOR PRIMARY AND INCISIONAL HERNIAS REPAIR: A DESCRIPTIVE ANALYSIS OF OUR EXPERIENCE

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AIM

This study evaluates the results of the extended totally extraperitoneal (e-TEP) laparoscopic approach for treating of primary and incisional midline and lateral hernias.

MATERIAL & METHODS

A retrospective multicentric study was conducted involving patients with primary and incisional hernias operated on between January 2020 and July 2024. The inclusion criteria were ventral hernias operated on by both laparoscopic and robotic e-TEP approach. Demographic information, hernia characteristics, technique, postoperative and follow-up results were analyzed.

RESULTS

Figure 1. Distribution

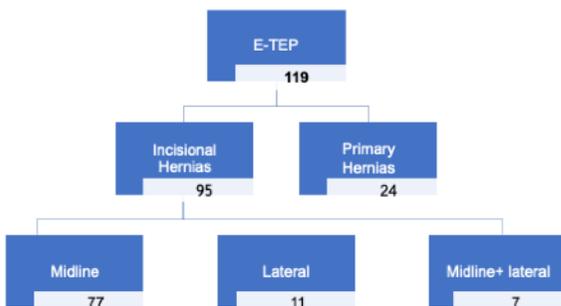
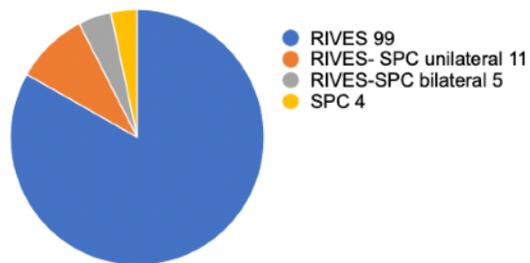


Figure 2. Surgical techniques



- **Defect size:** 53 (55,8%) were small (W1)
- **Average mesh area:** 558cm² (±197), average defect area: 13,24 cm² (±10,2)
- **Median hospital stay:** 1 día (range 1-8)
- **Recurrences:** 1 paciente (0,8%), median follow-up: 14,5 months (range 6-25,7)

CONCLUSIONS

Primary and incisional hernia repair using the eTEP approach:

- Is safe
- Reduces hospitalization time
- Has a low rate of complications and recurrences