

A prospective clinical trial on Laparoscopic intracorporeal rectus aponeuroplasty's (LIRA) outcomes and quality of life

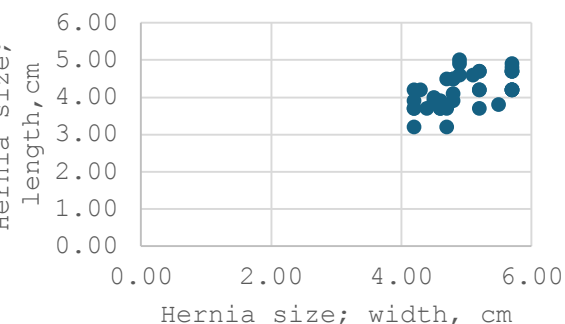
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AIM. Evaluate the quality of life (QoL), postoperative complications and hernia recurrence rate following LIRA for primary (PVH) and incisional ventral hernia (IVH), M2 and M3, W1-2

MATERIAL AND METHODS. Prospective unicenter observational cohort of LIRA conducted from May 2022 to May 2024, with a CT scan and a QoL assessment (EuraHS-QoL) before and at 6th. postoperative month.

Table. EPIDEMIOLOGY

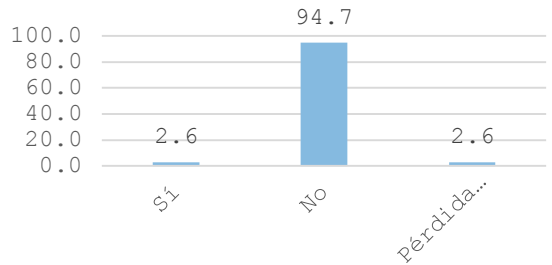
	LIRA n = 38
Female, n (%)	13 (34,21)
Age, mean (sd)	53,68 (13,41)
Body Mass Index, mean (sd)	27,41 (3,58)
Weight, mean (sd)	81,52 (15,14)
Diabetes Mellitus, n (%)	4 (10,53)
High Blood Pressure, n (%)	13 (34,21)
Chronic Obstructive Pulmonary Disease, n (%)	1 (2,63)
OSAHS /CPAP, n (%)	1 (2,63)
Without immunosuppressant, n (%)	38 (100)
Anticoagulation, n (%)	3 (7,89)
Smoking, n (%)	
Ex-smoking	2 (5,26)
No	30 (78,95)
Yes	6 (15,79)
ASA, n (%)	
ASA I	20 (52,63)
ASA II	14 (36,84)
ASA III	4 (10,53)
Type of hernia, n (%)	
Primary	27 (71,05)
Incisional	11 (28,9)
M2/M3, n (%)	
M2	7 (18,42)
M3	31 (81,58)
W1/W2	
W1	21 (55,3)
W2	17 (44,7)



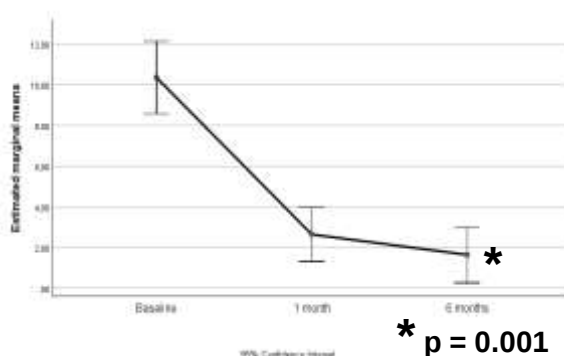
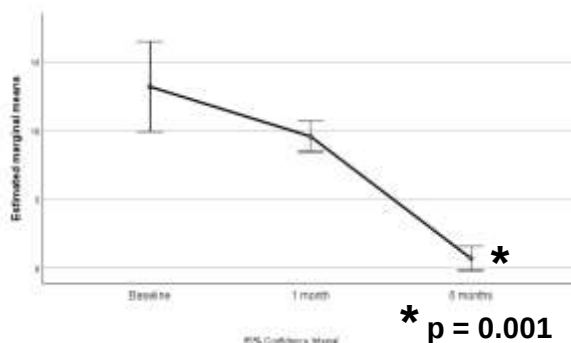
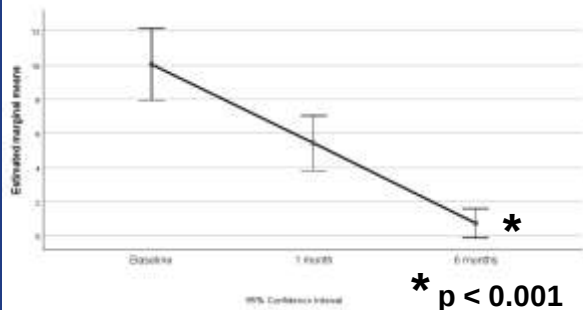
RESULTS

- SSI: 0%

% Recurrence



QUALITY OF LIFE-EuraHS QOL



CONCLUSIONS. LIRA technique for the repair of PVH and IVH, M2-M3 and W1-W2, improves subjective QoL, with a low rate of hernia recurrence and complications in a short term of follow-up.

REFERENCES. Balthazar da Silveira, C.A. et al. (2024). *Journal of abdominal wall surgery: JAWS*, 3, p. 13497. Gómez-Mencheró, J. et al. (2018). *Surgical endoscopy*, 32(8), pp. 3502. Gómez-Mencheró, J. et al. (2024). *Hernia*:28(1), pp. 167.