

Inguinal hernia

Modification of working port placement in TEP inguinal hernioplasty

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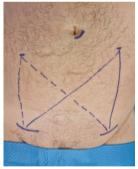
Aim: We submit a proposal for modification in the placement of laparoscopic ports for TEP inguinal hernioplasty.

Material & Methods: TEP inguinal hernioplasty is a profitable approach inguinal hernia. It brings benefits in the post-surgical recovery of patients. However, the classic location of the working ports makes it an unergonomic technique for the surgeon and requires maneuvers that are sometimes difficult to perform.

We present two modifications of the trocars placement, moving away from the midline as far as possible and using the lateral spaces, to achieve a more comfortable posture during surgery and less difficulty, especially during mesh placement.

Results: The authors' subjective feelings are satisfactory regarding the modification of this technique.

Conclusions: Modification in the placement of the working ports during TEP inguinal hernioplasty according to the characteristics of the hernia and the patient allows a more ergonomic posture for the surgeon and a wider range of motion, which translates into greater safety for the patient and, probably in the long term, better results.







Bilateral inguinal hernia: both ports far from midline

Unilateral
inguinal hernia:
one port in midline,
one port in
contralateral side

