

TAPP approach for lumbar hernia - A Case Report

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INTRODUCTION

A lumbar abdominal wall hernia is a protrusion of intraperitoneal or extraperitoneal contents through a weakness in the posterior abdominal wall, usually through the superior or inferior lumbar triangle. The inferior triangle of Petit and the superior triangle of Grynfeltt-Lesshaft are described as the two anatomical areas in which 95% of the cases of lumbar herniation occur, with a slight tendency towards the superior lumbar triangle

CASE REPORT

We present a case of 50 year old male , came with complaints of swelling over the right lumbar region. CECT abdomen showed lumbar hernia of defect 2.5 cm with omentum as content . Hence we proceeded to TAPP repair. Patient was placed on left lateral position, securely fastened to the table. We used one 10 mm camera port placed in the upper right quadrant and two 5 mm ports are placed subcostally and in the right flank. Peritoneal flap was created, and dissected the preperitoneal space to accommodate polypropylene mesh after closure of the defect using barbed sutures. The patient had less postoperative pain and started mobilizing on POD 1 followed up for period of 18 months and there was no recurrence.

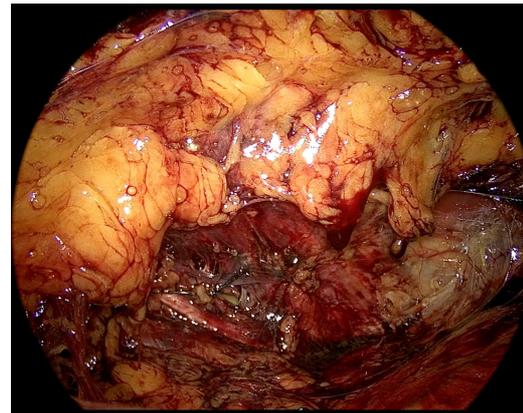
DISCUSSION

According to the underlying cause, lumbar hernia can be divided into primary lumbar hernia and secondary lumbar hernia. Spontaneous lumbar hernia can be divided into the superior lumbar triangle hernia (Grynfeltt) and inferior lumbar triangle hernia (Petit), both of which are naturally weakened areas in the dorsal abdominal wall. Patients arrive at the hospital because of a protruding bulge in the posterior abdominal wall without having any subjective symptoms. Open surgery for a lumbar hernia involves the following stages: direct suture repair, the Dowd technique, and mesh repair. Currently, TAPP and TEPP are the major laparoscopic procedures for lumbar hernias. Surgeons can directly observe the abdominal viscera via the TAPP approach, thus reducing the possibility of damaging these viscera. Meanwhile, TAPP provides a large operative space for ease of operation, can deal with relatively large defects.

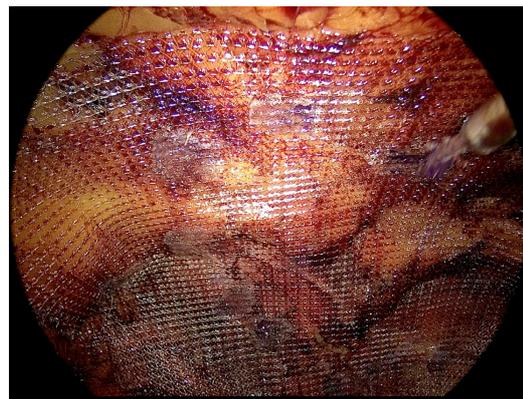
Right lumbar hernia



Closure of the defect



Placement of mesh



CONCLUSION

Lumbar hernia with a high rate of incarceration, an approach which visualizes the abdominal cavity is preferred, such as TAPP. TAPP repair offers several advantages compared to other minimally invasive or "open" repairs with a low rate of postoperative chronic pain.