

AB183. SOH21AS215. A 2019 nationwide review of emergency vs. elective umbilical hernia repair Ireland: is there a role for non-operative management?

Lauren Nicole Crone, Sami Medani Abd Elwahab,
Colm Power, Abeeda Butt, SORCHA O'Grady,
Jan Sorensen, Arnold Donald Konrad Hill

Department of Breast and General Surgery, Beaumont Hospital,
Dublin, Ireland

Background: Asymptomatic umbilical hernias are often repaired electively, however there are no high-quality studies defining benefits of elective repair compared to watchful waiting. Low evidence studies suggest that elective repairs are safer than emergencies, with 30-day readmission rates of 5.9% compared to 18.8% in emergency surgery. 16% of those managed conservatively require surgery within 5 years, 3.9% as emergencies.

Methods: The National Quality Assurance Improvement System (NQAIS) database was interrogated for umbilical hernia repairs in Ireland in 2019. Analysis was done to compare emergency versus elective umbilical hernia repair on total admissions, age, hospital level, total, pre- and post-operative LOS (length of stay); ICU admissions, 30-day readmissions, morbidity and mortality rates. Statistical package for the social sciences (SPSS) was used, p value of ≥ 0.05 was considered significant.

Results: Of 1,047 total repairs, 966 (92%) of surgeries were performed elective and 74 were emergency. 87% were day case operations with 94% done on the day of admission. Emergency patients were waiting between one to 19 days for surgery. Post-operatively, 71% were discharged on the day of surgery, and 29% had one to 43 days post-op stay.

ICU admission rate was 1.25% (12 patients) and the 30-day mortality rate was 0.5% (5 patients).

Conclusions: Twenty-two umbilical hernia operations were performed per 100,000 people in Ireland in 2019. Only 71% went home the same day. Within the limitations of this study, the preoperative LOS suggests ongoing issues with access to emergency theatre. There are also issues with elective operations being performed as day-case surgeries, with 24% requiring overnight admission.

Keywords: Elective; emergency; hernia; repair; surgery; umbilical

Acknowledgments

Funding: None.

Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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doi: 10.21037/map-21-ab183

Cite this abstract as: Crone LN, Abd Elwahab SM, Power C, Butt A, O'Grady S, Sorensen J, Hill ADK. A 2019 nationwide review of emergency vs. elective umbilical hernia repair Ireland: is there a role for non-operative management? Mesentery Peritoneum 2021;5:AB183.