

AB078. SOH22ABS127. The 'sandwich' technique for large and complex incisional hernias: a retrospective review

Arielle Pierre, Enda Hannan, Orla McCormack

Department of General Surgery, Mater University Hospital, Dublin, Ireland

Background: Repair of large incisional hernias is challenging as primary fascial closure often cannot be achieved. The peritoneal flap hernioplasty, or 'sandwich' incisional hernia repair (SIHR), serves to close the fascial gap by utilisation of the thickened hernia sac which also isolates the mesh from intraperitoneal contents and the subcutaneous space. We report outcomes from utilisation of this technique in our institution.

Methods: A retrospective review of patients that underwent SIHR over a 3-year period was performed. Demographic, perioperative and postoperative data was collected.

Results: Thirty-three patients underwent SIHR [median age 64 years, 60.6% female, median body mass index (BMI) 33, 60.6% ASA 3] during the study period for both midline (78.8%, n=26) and off-midline defects (21.2%, n=7), of which 24.2% (n=8) were emergency procedures. The median estimated blood loss was 175 mL. The median length of stay was 8 days. The overall complication rate was 21.2% (n=7), most of which were wound seromas (12.1%, n=4) or superficial wound infections (6.1%, n=2). One (3%) 30-day re-operation occurred for repair of a small bowel enterotomy. There were no 30-day mortalities. No patients have represented with a recurrent incisional hernia to date and there have been no documented occurrences of mesh infection.

Conclusions: This study demonstrates that complex abdominal wall defects can be successfully reconstructed using the SIHR technique with a low recurrence rate and acceptable postoperative morbidity in a particularly comorbid patient population. This is a versatile technique that can be used in elective and emergency scenarios for both midline and off-midline defects.

Keywords: Fascial gap; incisional hernia; peritoneal hernioplasty; retrospective review; sandwich technique

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-22-ab078

Cite this abstract as: Pierre A, Hannan E, McCormack O. AB078. SOH22ABS127. The 'sandwich' technique for large and complex incisional hernias: a retrospective review. Mesentery Peritoneum 2022;6:AB078.