

Open versus Bianchi inguinal hernia repair in pediatric age group a comparative study

Abstract

Inguinal hernia repair is one of the most common general surgical operations performed by pediatric surgeons and evolution of hernia repair throughout history has led to the conclusion that a simple removal of the hernia sac "herniotomy" is sufficient for treatment of pediatric inguinal hernias.

The classic inguinal approach for treatment of inguinal hernia has proven its efficacy in all aspects of treatment: adequate access to the hernia sac and its neck, minimal damage to the gonads, low recurrence rate and an acceptable scar.

Recently, minimally invasive techniques using laparoscopy have provided an alternative method for surgical repair of pediatric inguinal hernias. Early results using laparoscopy had a higher recurrence rate and a longer operative time, but refinements in the techniques used and continued experience have lowered these risks. Advantages of laparoscopic repair are fewer steps, less dissection, and better visual exposure of anatomy. The laparoscopic approach also offers the surgeon the ability to easily examine the contralateral groin and to repair any hernia found

Despite of the higher recurrence rate detected early in the start of this study, no recurrences reported after refinement of the steps in the laparoscopic technique and change of the suture material .

Conclusion: Laparoscopic approach is a good alternative for the classic inguinal approach in management of patent processus vaginalis pathologies and in diagnosis and management of the undiagnosed contralateral hernias.