ABSTRACT

BACKGROUND:
In recent years, general surgeons who perform inguinal hernia repair have paid attention to successful reduction in the recurrence rate. The Lichtenstein technique is widely used because it is easy to learn and is associated with a low rate of complication and recurrences. Today, the new objective in primary hernia surgery should be to reduce complications such as chronic pain. Chronic pain after hernia repair can be disabling, with considerable impact on quality of life and there is evidence to suggest increased use of health services by patients who have chronic pain.

METHODS
This study is a prospective study of glue mesh fixation for primary unilateral inguinal hernia’s during the period December 2017 – November 2018, Government Rajaji Hospital, Madurai Medical college. Number of cases studied is 60 were recruited for the study based on the eligibility criteria and informed written consent. Relevant data regarding history, clinical examination and investigations were collected and properly recorded. The patients would then be divided into (Group A) cyanoacrylate glue fixation of the mesh & (Group B) suture mesh fixation. short-term outcomes like length of operation time, pain, postoperative analgesia requirement within
24hrs, hematoma, seroma, long term out comes like chronic pain, sensation of extraneous body, recurrence & time to return to work/normal activities were monitored in frequent intervals for 1st month, 3rd month, 6th month & 1 year. These parameters were analyzed using chi square test & P value.

RESULTS:

This study compares the post-operative morbidity of mesh fixation with cyanoacrylate glue in lichtenstein Hernioplasty over sutures. Cyanoacrylate glue for mesh fixation in the Lichtenstein repair of inguinal hernia shows advantages over sutures, including less duration of operating time(0.01), lower incidence of complications such as post-operative pain(0.017), post-operative analgesia requirement, seroma formation(0.03), foreign body sensation(0.01), chronic discomfort and duration of hospital stay(0.01).

CONCLUSION

Our study favours the use of cyanoacrylate glue for hernia mesh fixation in Lichtenstein Hernioplasty which is better tolerated than sutures and is not associated with an increased risk of hernia recurrence.

KEYWORDS: Inguinal hernia; Hernia repair; Cyanoacrylate glue; Mesh fixation