ABSTRACT

“A PROSPECTIVE STUDY EVALUATING THE USE OF POLYPROPELENE MESH IN EMERGENCY SURGERY OF OBSTRUCTED HERNIAS”

Introduction:
One of the most common complication regarding emergency hernia surgery is concerned is its recurrence rate. In cases of obstructed hernias whether umbilical, incisional & inguinal hernioplasty has added advantage over herniorrhaphy with regards to low recurrence rates, less postoperative pain , less chances of seroma, and less postoperative complications. The only contraindication for hernioplasty is gangrenous bowel or toxic fluid, which can lead to infection to mesh later, further to mesh rejection.

AIMS AND OBJECTIVES
1. To evaluate the use of polypropylene mesh in the emergency surgery of obstructed hernias
2. To compare the outcome of patients operated using mesh (plasty) versus anatomical repair (rhaphy) in terms of immediate and early / late post operative complications

MAREIALS & METHOD
This is a prospective study comprising 54 patients of obstructed hernia over a period of 6 months from March 2016 to August 2016 with 12 months follow-up. In this present study, the clinical material consists of patients admitted with obstructed hernia (both males and females) in the Department of General Surgery at Government Rajaji Hospital, Madurai. The size of the sample works to 54 cases. 36 cases with hernioplasty (group A) 18 cases with herniorrhaphy (group B).

RESULT
A total of 54 patients of obstructed hernias who underwent emergency surgery in Department of general surgery, Government Rajaji Hospital, Madurai during the period from March 2016 to August 2017, were included in this prospective study, and randomized into two groups. Patients with (Group A) 38 patients with HERNIOPLASTY, and 16 patients with herniorrhaphy (Group B). Patients were evaluated, age, sex, time of presentation, pain, seroma, and wound complications, recurrence. Patients who underwent hernioplasty and herniorrhaphy were evaluated for recurrence rates and it was found that no recurrences occurred out of the 38 cases of hernioplasty, while 4 cases out of the 16 cases of herniorrhaphy developed recurrence with a significant p value of 0.011.

CONCLUSION
For many decades Light’s criteria had been used widely to differentiate exudative from transudative pleural effusion. But it also misclassified 25% of transudates as exudates, so there was a need to identify new parameters which would prove to be superior or supportive to the array of tests at present.

From our study we came to known that there was statistically significant criteria[p value<0.001] in classifying pleural effusion as exudates and transudates by using pleural fluid uric acid andpleural fluid/serum uric acid ratio.

Keyword: umbilical, incisional, inguinal, hernioplasty, herniorrhaphy.