Total extraperitoneal pre-peritoneal hernia repair (TEP) or lichtenstein repair in patients above the age of 70 years

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Introduction: The total extra peritoneal laparoscopic hernia repair (TEP) and the Lichtenstein repair, (a conventional tension free repair with mesh), are two competitive approaches for the repair of inguinal hernia in seniors.

Patients & Methods: From April 1st 2009 till December 31st 2012, 483 surgeries for inguinal hernia repair were carried out in our surgical department. 354 of the surgeries were performed laparoscopically in the so called TEP approach and in 129 patients the conventional Lichtenstein repair was done. 76 patients (70 years and older), with a single or bilateral inguinal hernia were retrospectively studied. Patients were randomly allotted to groups undergoing either TEP- or Lichtenstein repair.

Results: TEP was carried out in 37 patients and a Lichtenstein repair in 39 patients. 10 cases of bilateral inguinal hernia were simultaneously repaired laparoscopically whereas only 5 patients underwent a simultaneous Lichtenstein repair for bilateral inguinal hernia. The median duration of TEP repair for unilateral inguinal hernia was calculated at 50 minutes (28-75) and for unilateral Lichtenstein repair 55 minutes (30-135). The median duration of bilateral hernia repair was 73 minutes (35-115) for TEP and 85 minutes (30-140) for Lichtenstein repair respectively. The median postoperative hospital stay was 5 days (2-22) for the unilateral TEP repair, 6 days (4-14) for unilateral Lichtenstein repair, 5 days (3-6) for bilateral TEP repair and 7 days (5-11) for bilateral Lichtenstein repair. No case of wound infection was noted. 3 patients allotted to the Lichtenstein repair group, developed postoperatively a scrotal swelling. 1 Patient randomized to either group developed a hematoma.

Conclusion: Both surgical procedures are comparable with respect to their hospital stay, duration of surgery and complication rates. However, laparoscopic herniorrhaphy for bilateral inguinal hernia tends to be associated with a speedy convalescence prompting an early hospital discharge. We therefore recommend the laparoscopic herniorrhaphy (TEP) for inguinal hernia repair in seniors.