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Laparoscopic Inguinal Hernia Repair TAPP under Regional Aneshesia: Clinical Experience

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Objective: Laparoscopic inguinal hernia repair transabdominal preperitoneal (TAPP) is conventionally done by general anesthesia. This procedure can be performed by regional anesthesia. We present four years of experiences (Jan 2012–Dec 2015) using regional anesthesia for laparoscopic inguinal hernia repair TAPP to assess the feasibility and safety of this procedure.

Methods: Between Jan, 2012 to Dec, 2015, 93 patients with inguinal hernias, ASA I & II, underwent TAPP repair under loco regional anesthesia [spinal/peridural/combined, sedation (Midazolam) and analgesia (morphine/fentanyl)], spinal anesthesia level VL III–IV, Spinocan 29G with block target VTh IV-V using a low pressure CO2 (10–12 mm Hg) pneumoperitoneum. Strangulated and obstructed patients were excluded but irreducible were included. All defects covered by low weight plain mesh 10x15 cm and fixated by secure strap. Patients were followed up over one year period.

Results: There was neither conversion from spinal anesthesia to general anesthesia nor to opened surgery. Age: 17–53 years (average: 32 years), sex: male 88 patients, female five patients. Defects: unilateral 88, bilateral five, six patients with recurrent case. Operating time: 30–135 minutes (average: 60 minutes). Average hospital stays one, five days (one–two days). Two patients complained of shoulder pain, two patients suffered bradycardia and one hypotension intra operatively. There were no postural headache, PONV (post-operative nausea and vomiting) and urinary retention found.

Conclusion: TAPP repair is feasible and safe under regional anesthesia. Further studies are required to validate this technique.

Biography

Alexander Surya Agung is a Head of Surgery department at Bhayangkara Police Hospital, Surabaya, Indonesia. He completed his Medical Doctor at University of Airlangga, Surabaya-Indonesia and; General Surgeon at University of Airlangga, Surabaya-Indonesia. He is interested in Minimally Invasive Surgery and, attended courses at Singapore, India, Taiwan and Philippines. He is a member of Indonesian Endo-Laparoscopic Society, Indonesian Hernia Society, Endoscopic and Laparoscopic Surgeons of Asia, Asia Pacific Hernia Society and European Association for Endoscopic Surgery.

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