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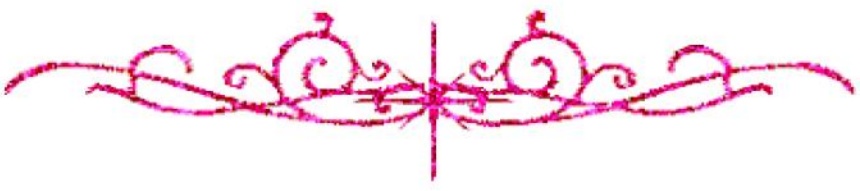

بالرسالة صفحات
لم ترد بالأصل

Comparative Study between Lichtenstein Repair and Trans Abdominal Pre Peritoneal Repair of Inguinal Hernia (TAPP)

Thesis

Submitted for Partial Fulfillment of
Master Degree in ***General Surgery***

By

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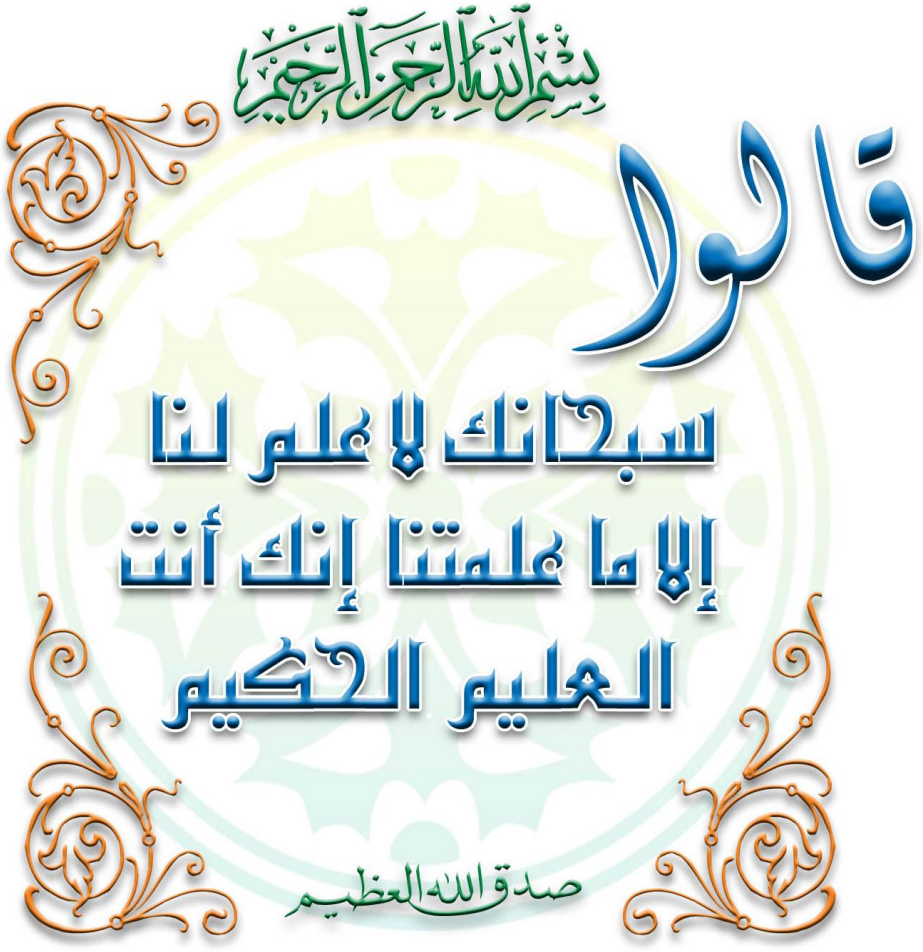
2020



سورة البقرة الآية: ٣٢

Acknowledgments

First and foremost, I feel always indebted to ***Allah*** *the Most Beneficent and Merciful.*

I wish to express my deepest thanks, gratitude and appreciation to ***Prof. Dr./ Adel Faheem Ain-shoka****, Professor of General Surgery, Faculty of Medicine, Ain Shams University, for his meticulous supervision, kind guidance, valuable instructions and generous help.*

Special thanks are due to ***Dr/ Mohamed Ibrahim Hassan****, Assistant Professor of General Surgery, Faculty of Medicine, Ain Shams University, for his sincere efforts, fruitful encouragement.*

I am deeply thankful to ***General Dr./ Khaled Abdel-Aziz Elkholy****, Head of General Surgery, Maadi Military Hospital, for his great help, outstanding support, active participation and guidance.*

I would like to express my hearty thanks to all my family for their support till this work was completed.

Ahmed Wahid Said Mohamed Matter

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List of Abbreviations

Abb.	Full term
Abd. Wall	*Abdominal wall*
ADLs	*Activities of daily living*
CT	*Computered tomography*
ED	*Emergency department*
NRS	*Numeric rating scale*
OLR	*Open Lichtenstein repair*
SPSS	*Statistical Package for the Social Sciences*
TAPP	*Trans abdominal pre peritoneal*
TEP	*Total extra peritoneal repair*
VAS	*Visual Analogue Scale*

INTRODUCTION

Hernia is defined as an abnormal protrusion of an organ or tissue through a defect in its surrounding walls ***(Courtney, 2012).***

Hernia repair is one of the most common operations performed by general surgeons. Despite the frequency of this procedure, no surgeon has ideal results, and complications such as postoperative pain, nerve injury, infection, and recurrence remain ***(Courtney, 2012).***

The standard method for inguinal hernia repair had changed a little over a hundred years until the introduction of synthetic mesh. This mesh can be placed by either using an open approach or by using a minimal access laparoscopic technique. It was found that there is suggested less pain and numbness following laparoscopic repair. Return to usual activities is faster ***(McCormack, 2014).***

No single repair technique is likely to take care of all patients with inguinal hernias. Therefore, surgeons repairing inguinal hernias should be familiar with both laparoscopic and open approach to offer the patient the most appropriate repair technique ***(McCormack, 2014).***

Laparoscopic techniques are being used in the repair of inguinal hernias and offer the potential benefits of minimal

access surgery, possibly a lower recurrence rate ***(Olmi et al., 2007)***.

Laparoscopic repair is effective for the vast majority of patients with primary or recurrent inguinal hernias and results in low recurrence rates, with high patient satisfaction scores ***(Christine et al., 2009).***

Trans-abdominal pre-peritoneal repair of inguinal hernia (TAPP) has a higher cost th8an open (lichtenstein) repair of inguinal hernia ***(Anadol et al., 2004).***

The surgical techniques employed in the laparoscopic inguinal hernia repair (TAPP) are more difficult than those used for open repair ***(Kapiris et al., 2001).***

Open hernia repair can be done under general, spinal anesthesia or local anesthesia, but laparoscopic repair requires general anesthesia ***(McCormack, 2014)***.

Therefore, surgeons repairing abdominal wall defects should be familiar with both open and laparoscopic approaches to hernias to offer the patient the most appropriate repair ***(John et al., 2014).***