

Human Fibrin Glue Sealing versus Suture Polypropylene Fixation in Lichtenstein Inguinal Herniorrhaphy: a Prospective Observational Study

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Abstract

Background: Patients who underwent primary inguinal hernia repair still report a high rate of postoperative pain after operation due to the effect of mesh fixation by suture. An alternative is the use of human fibrin glue. We compared the two techniques.

Methods: 468 patients randomly underwent primary inguinal hernia Lichtenstein repair fixing the mesh by suture or by human fibrin glue (HFG); in both cases the mesh was fixed to the posterior wall of the inguinal canal and to the inguinal ligament.

Results: No significant differences were recorded between the two groups in terms of complications, while the sutureless technique reduces the operative time and the postoperative pain.

Conclusions: A widespread technique for the treatment of inguinal hernia is the application of a mesh using Lichtenstein procedure. The prosthesis can be fixed by traditional suture or using a new method of sutureless fixation with adhesive materials that shows an excellent local tolerability and lack of adverse effects and contraindications.

Key words: polypropylene hernia mesh, Lichtenstein inguinal herniorrhaphy, human fibrin glue

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