

肝移植術後腹部疝氣的腹腔鏡修補
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Laparoscope Ventral Hernia Repair after Liver Transplantation

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Objective:

Laparoscopic ventral hernia repair is associated with fewer wound complications and a decreased incidence of recurrence when compared to open hernia repair in nontransplant patients.

Materials and Methods:

This is a retrospective review of 10 serial patients who underwent laparoscopic incisional hernia repair (LAP group) after liver transplantation compared to 10 patients who had open repairs (OP group; all with mesh). Primary immunosuppression in both groups were on the same regimen.

Results:

All LAP group was completed with a laparoscopic approach; there were no conversions to open. Length of stay differed significantly between the 2 groups, with a mean of 3.4 days for the LAP group compared to 7.6 days in the OP group ($p < 0.05$). No major complications occurred in the LAP group and 1 in the OP group for mesh infection requiring mesh removal. Two of the patients in the OP group developed a recurrence.

Conclusion:

Laparoscopic incisional hernia repair is safe in patients after liver transplantation, with a low risk of infection or recurrence.