

SIV10: LAPAROSCOPIC HERNIA REPAIR IS SAFE TO PERFORM ON PREMATURE BABIES WITH ASSOCIATED CO-MORBIDITIES

Mus Alabdullah*¹, and Max Pachl²

E-mail: Mus Alabdullah — dralabdullah@doctors.org.uk

¹Senior clinical fellow in paediatric surgery, Birmingham children's hospital, Birmingham, United Kingdom ²Consultant paediatric surgeon, Birmingham children's hospital, Birmingham, United Kingdom

Background Laparoscopic hernia repair is an evolving technique with many benefits. It can be undertaken in premature infants and facilitates repair of bilateral indirect and/or direct herniae. The aim of this study was to assess the safety of the procedure in premature infants operated on within the first year of life and those with co-morbidities such as chronic lung and cardiac disease.

Materials and methods Retrospective review of prospectively collected single surgeon data between April 2016 and January 2017

Data collected included demographics, weight, gestational age, co-morbidities, pre and post operative hernia laterality and follow up.

Results N=10 M:F 9:1 The median gestation age at birth (range) was 28(25-38) weeks. Median corrected age at surgery was 42 (40-72) weeks. Median weight was 3.6(2.3 -5) kg.

Eighty percent of the patients required an urgent repair and 80% had associated respiratory and / or cardiac co-morbidities including one patient who had had a truncus repair and one patient who was on home oxygen.

Thirty percent had a preoperative diagnosis of bilateral herniae and 50% had this diagnosis post-operatively. In one patient a direct hernia was repaired along with a contralateral indirect hernia.

There were no immediate intra-operative or anaesthetic complications noticed. There were no conversions to open. One patient had a planned overnight stay post-operatively and there were no incidences of postoperative apnoea.

Median follow up was 12.5(1-40) weeks. There was one recurrence in the early post-operative period.

Conclusions Based on our early results laparoscopic hernia repair in preterm infants and low birth weight babies with associated co-morbidities, is a safe and feasible procedure. Moreover it has some procedural benefits compared to the standard open technique.

Key words hernia, laparoscopic repair