



Review article

A Systematic Review and Meta-Analysis of Surgical Management Options for Hernia

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ABSTRACT

Update and comprehensive evaluation, within the main approaches for inguinal hernia, in the setting of randomized clinical trials. More than 20 million patients suffer from inguinal hernia and undergo elective repair each year worldwide. Lichtenstein tension-free repair is the most commonly used procedure, with reported low recurrence and complication rates. Due to the advent of innovative surgical platforms, surgical technique has evolved through minimally invasive approaches. Therefore, laparoscopic transabdominal preperitoneal (TAPP) repair, totally extraperitoneal (TEP) repair, and robotic TAPP (rTAPP) have emerged. Compared with the Lichtenstein technique, such minimally invasive approaches appear to be associated with comparable wound-related complications, recurrence rates, and more rapid return to usual activities and work. However, criticism has arisen related to the long learning curve and higher costs, and the definitive indication of the best surgical option for the treatment of inguinal hernia remains unresolved. Previous systematic reviews of randomized controlled trials (RCTs) have been published on this topic. However, those studies were partial because they were limited by pairwise comparison and controversies. A previous network analysis has been published with a literature review that actually ended in 2015. Therefore, because of the recent publication of 4 trials, new additive evidence is available. The purpose of this network analysis was to perform an update and a comprehensive evaluation, within the main approaches for inguinal hernia, in the RCT scenario.

Keywords: *Inguinal hernia, treatment, Surgical techniques, clinical trials*

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