

PRODUCT DISCUSSED: ProGrip™ self gripping mesh

PURPOSE OF THE STUDY
Critically, it has been mentioned that suturing the mesh is one of the most challenging part of the surgery for inexperienced surgeons. The aim of this study was to analyze if the use of a selfgripping mesh in open hernia repair performed by junior surgery residents can reduce operative time compared to the use of classically fixed meshes.

METHODS
• In the time period between January 2006 and January 2008, 65 male patients with open hernia repair performed by junior surgical residents (experience <10 open hernia repairs) directed by a senior surgeon were enrolled in this study
• 31 patients were enrolled in the classical Lichtenstein mesh repair group (Group 1, Ultrapro™, Ethicon) and 34 patients were enrolled in the new self-gripping mesh (Group 2, ProGrip™ mesh, Covidien)
• The authors analyzed the operative time (defined as the time from skin incision to the placement of the final dressing)
• All patients operated on suffered from primary small hernias (LP1/2 and MP1/2 according to EHS guidelines). All repairs of recurrent hernia and big hernias (LP3, MP3, LR1-3, MR1-3) were excluded
• Short-term results were reported within 10-14 days after the surgery doing clinical examination
• The median long-time follow-up was 12 months (the outcomes were assessed by a clinical examination)

RESULTS
• The mean operative time of inguinal hernia repair performed by inexperienced surgeons decreased significantly to 46.8 ± 18.8 min using the self-gripping mesh (G2) (Table 1)

<table>
<thead>
<tr>
<th></th>
<th>Ultrapro™ (G1)</th>
<th>ProGrip™ (G2)</th>
<th>P</th>
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</thead>
<tbody>
<tr>
<td>Junior Residents</td>
<td>67.5 ± 23.5</td>
<td>46.8 ± 18.8</td>
<td>&lt;0.001</td>
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<tr>
<td>Senior Surgeons</td>
<td>40.7 ± 16.3</td>
<td>35.9 ± 12.9</td>
<td>&lt;0.001</td>
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</table>

DISCUSSION
• Some Studies estimate operation time to cost between US$5 and US$25 per minute. Regardless of financial constraints, working-time limitations within resident training programs are a reality in the hospitals management

CONCLUSIONS
• In this study, the authors concluded that the use of a new device, like the self-gripping mesh in open hernia repair can reduce the operation time and subsequently reduced costs significantly

This concludes the clinical synopsis of this publication