

INGUINAL HERNIA REPAIRS IN ENGLAND: WHO IS DOING WHAT AND HOW?

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Aims of the Study: Laparoscopic repair of inguinal hernia (LapIH) in children was first performed in 1993. The aim of this study was to determine the impact of LapIH in infancy using a National database.

Methods: The Hospital Episodes Statistics (HES) database collects information on every episode of patient care in the English NHS and can be analysed using SWORD (Surgical Workload Outcomes Audit Database) software. Paediatric inguinal hernia repair in the <1 age group was explored during the period 2011-16. Data were limited to the 21 Paediatric Surgical Units (PSUs) in England.

Main Results: Nationally 11,809 inguinal hernia repairs were undertaken with 10,668 (90.3%) [elective (n = 8183) & emergency (n = 2485)] repairs performed in PSUs. Open repair was overwhelmingly favoured (n=9511; 89% vs. n=1157; 11%). Indeed only 6/21 routinely (>25% of their overall caseload (FIGURE)), used the laparoscopic approach and only 2/21 for >50%.

In 2011, 10 centres provided LapIH (although with <10 cases/year in half of these centres). By 2015-16, LapIH was available in 17 centres nationally. At the start of the period the top three centres performed between 31% (n=27 & n=29) and 79% (n=81) of their inguinal hernias laparoscopically. At the end, the same centres had similar volumes i.e. 42% (n=44) and 82% (n=49 & n=74). Emergency repairs were even less likely to be performed laparoscopically (93% vs. 7%), though one centre reported this in 79% of its cases.

Laparoscopic repair was slightly favoured in females, with 14% undergoing LapIH versus 10% of males (P = 0.0003).

Conclusion:

- Dramatic variation in the provision of LapIH repair across England.
- Surgical opinion is clearly divided - mostly centres have an almost uniform policy of open IH repair with only a small number of centres actively favouring LapIH.