

INCISIONAL HERNIA AFTER LIVER TRANSPLANTATION. OUR EXPERIENCE WITH TRANSVERSUS ABDOMEN RELEASE FOR REPAIR

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Background : Incisional hernia is a common complication after liver transplantation (LT) due to extended incision and immunosuppression. Posterior Component Separation (PCS) with Transversus Abdominis Release (TAR) has been reported in limited series in LT recipients with good results.

Methods : At our Centre, from December 2023 to December 2024, 19 transplanted patients underwent TAR with PCS (M = 17, F = 2). Fifteen patients had a previous Mercedes incision while 4 had a Makuuchi incision. Hernia have been classified according to the European Hernia Society Classification: Ten patients had both median (M) and lateral (L) defects, 12 had a width (W) > 10 cm and 7 had multiple “swiss cheese” W1 and W2 defects.

Results : In all the cases a 45 x 60 cm or 30 x 45 cm prothesis was placed over the posterior fascia (3 polypropylene and 16 polyvinylidene fluoride PVDF). Eight cases required an additional dual mesh prothesis due to the impossibility to close the posterior fascia while 2 required an additional polyglycolic acid prothesis reinforcement due to the thinness of the posterior fascia. All patients underwent an enhanced recovery protocol. Median in-hospital length of stay was 6 days. Complications were: 1 seroma, 1 bleeding treated conservatively, 1 prolonged ileus, 1 ascites. We did not have hernia recurrences.

Conclusions : Our experience shows this technique can be safely used in LT patients with low incidence of complication and no recurrent hernia.

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