



## Gender Differences in Recurrence After Groin Hernia Repairs Depending on Surgical Approach

In a study published in *Hernia*, Kaiser Permanente General Surgeons and Medical Device Surveillance & Assessment Researchers compared male and female patients' risk of reoperation following different hernia repair approaches (open, laparoscopic, and robotic).

Women may uniquely benefit from a laparoscopic or robotic hernia repair, possibly due to the ability to routinely identify an occult femoral hernia with these minimally invasive approaches.

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### Study Details

The study cohort was comprised of 110,805 patients 18 and older who underwent 131,626 first inguinal repairs with mesh during 2010-2020, 10,079 (7.7%) repairs were in females. Multiple Cox proportional-hazards regression was used to evaluate the association between sex and risk for ipsilateral reoperation during follow-up. Analysis was stratified by surgical approach (open, laparoscopic, and robotic).

Following open groin repair:

- Females had a higher risk of reoperation than males but a lower reoperation risk when using the laparoscopic approach.
- The crude 5-year cumulative reoperation probability following robotic repair was 2.8% in males and no reoperations were observed for females.
- Of females who had a reoperation, 10.3% (39/378) were for a femoral hernia, while only 0.6% (18/3110) were for femoral hernias in males.

### Practice Considerations

- Lower risk was observed for females through a minimally invasive approach (laparoscopic or robotic) and may be due to the ability to identify an occult femoral hernia through these approaches.
- Women who need groin hernia repair may benefit from a laparoscopic or robotic surgical approach.
- A minimally invasive inguinal hernia repair should be considered by surgeons as the primary surgical approach for females with groin hernias.
- If an open repair is pursued in a female patient, evaluation for a femoral hernia with dissection of the inguinal floor should be considered as a strategy to minimize the risk of reoperation.

### [Link to Full Publication](#)

Maertens F, Chan PH, Prentice HA, Brill E R, Paxton EW, Mostaedi R. (2023). **Female sex and ipsilateral reoperation risk following mesh-based inguinal hernia repair: a cohort study including 131,626 repairs in adults from an integrated healthcare system over a 10-year period** *Hernia*, (Epub ahead of print).