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Hernia surgery has always been considered the “bread and butter” of general surgery, but more recently there has been a recognition that some hernias are more complex and more difficult to repair than others. This has led to discussion as to whether hernia surgery should be recognised as a subspecialty interest within the field of general surgery.

I am a member of the ANZ Hernia Society, and we had our first international meeting in Brisbane last year. I was a faculty member, and presented on inguinal and umbilical hernia repair and I am again on faculty for the meeting in Melbourne later this year.

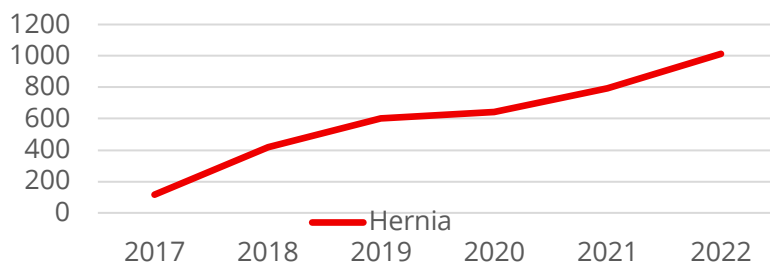
Abdominal wall reconstruction, most commonly due to incisional hernias following laparotomy, has become a specific area of interest in my practice. Incisional hernias can often be quite debilitating for patients and adversely impact on their quality of life.

Obviously, it is better to repair these hernias when they are smaller, but they are often ignored and become very large.



Access to the Da Vinci robot at North West Private Hospital on a regular basis has facilitated the repair of incisional hernias in a minimally invasive manner. Often, the

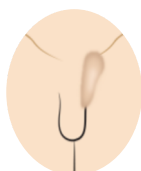
combination of pre-operative Botox treatment<sup>1</sup> of the lateral muscles of the anterior abdominal wall, combined with a robotic procedure, can result in a minimally invasive repair of often quite large incisional hernias.



**DA Vinci Robot AUS**  
General surgery is the fastest growing specialty area and hernia is the fastest growing procedure type. In 2022, Inguinal hernia increased by 41% and Ventral hernia increased by 21%.

With regard to robotic repair, there is some evidence that in patients over the age of 65, robotic surgery results in a shorter length of stay and, interestingly, better quality of life scores at 12 months post-surgery.

Robotic hernia repair is also beneficial in inguinal hernia repair, particularly in individuals who have had previous surgery such as prostatectomy, in patients with truncal obesity, the typical middle-aged man with a BMI over 40. The robot also facilitates a minimally invasive approach to recurrent inguinal hernias and also larger hernias such as inguinoscrotal or incarcerated or strangulated. Most of these procedures are carried out as an overnight stay, and I am pleased to be able to advise that there is no additional hospital fee for the use of the da Vinci robot at North West Private Hospital.



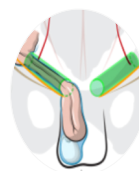
Recurrent



Prior surgery



Obesity



Inguino-scrotal



Incarcerated and strangulated

When it comes to the investigation of inguinal hernias, ultrasound scan is not useful and is routinely ignored by hernia surgeons. CT scan can be useful, particularly for the planning of repairs of large ventral hernias, and MRI is useful whenever there is an atypical history, as it can be useful in diagnosing other conditions such as a labral hip tear which can present as groin pain.

<sup>1</sup> A. Jacombs et al. Seven years of preoperative BTA abdominal wall preparation and the Macquarie system for surgical management of complex ventral hernia. *Hernia* (2022) 26:109–121