

# UNIPINNEWS



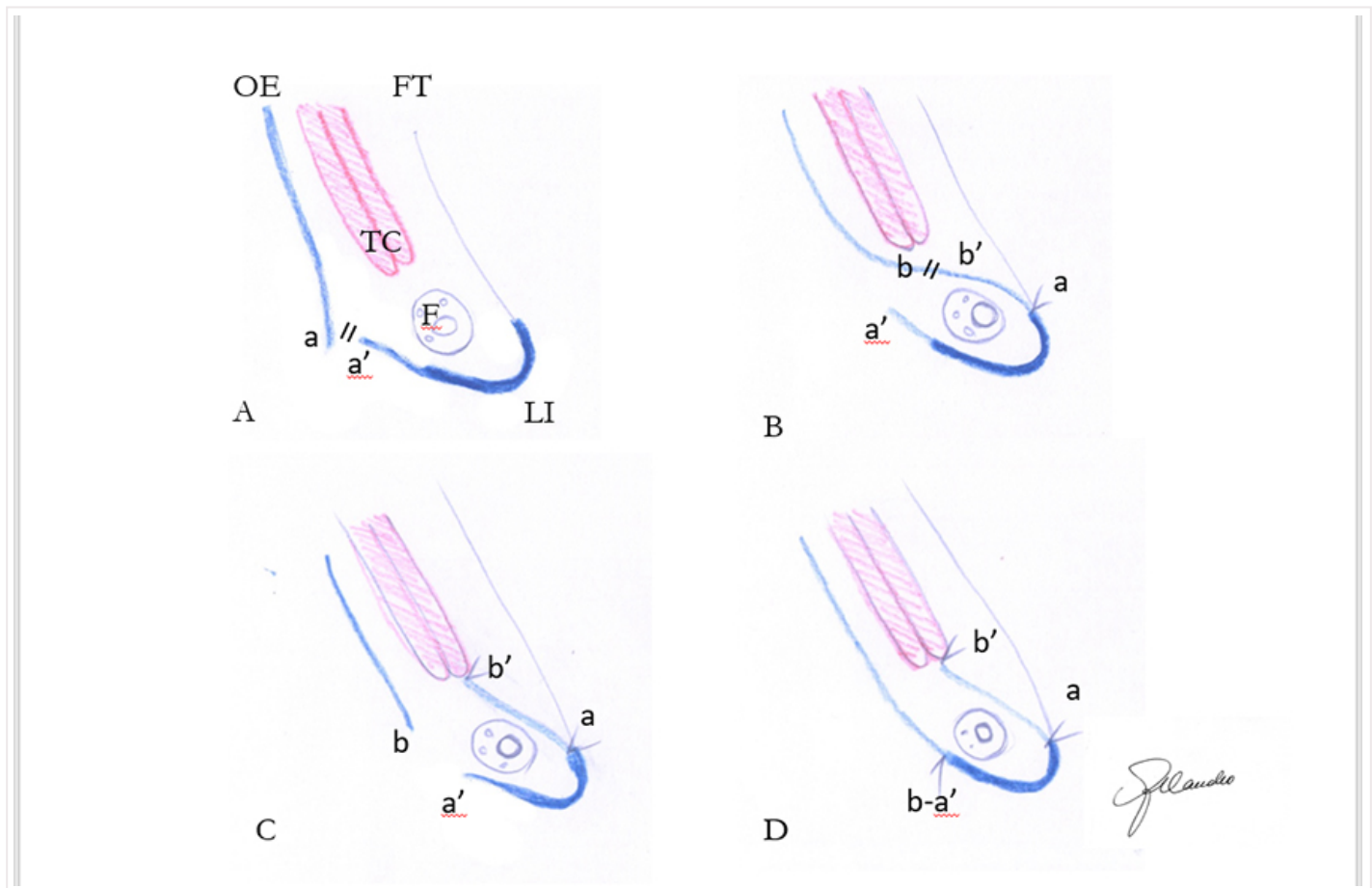
## In Pisa innovative technique to repair inguinal hernias

The University Hospital first in Tuscany to apply the procedure designed by the Indian surgeon Mohan P. Desarda



**In Pisa, first in Tuscany, the Desarda technique for the repair of inguinal hernia has been successfully tested for some time.** This is an alternative procedure, conceived precisely by the Indian surgeon Mohan P. Desarda, who renounces the use of synthetic prostheses based on a thorough knowledge of the inguinal anatomy. For the correction of the defect of the posterior wall of the inguinal canal - which is at the basis of the hernia pathophysiology - the technique uses in fact the external oblique muscle band, appropriately sectioned and shaped, which is transposed downwards and used as reinforcement of the parietal defect .

The first 13 cases of intervention with the Desarda technique in Tuscany were performed in the **Departmental Department of General Surgery of the University of Aoup by Dr. Francesco Porcelli** , under the guidance of Professor **Giulio Di Candio** , who stimulated its use.



In practice, compared to the Bassini technique of 1890 and subsequent modifications - up to the Shouldice of 1952 (two layers, 4 suture lines), which undoubtedly represent the historical reference - the technique of Desarda does not involve the joint tendon, does not lower it and solidarizza, forcing it, to the inguinal ligament, thus avoiding the residual tension that forced the surgeons to abandon these procedures in the face of "tension free" techniques with prostheses ( *Fig-1 ad* ).

**Inguinal hernia is one of the most frequent pathologies and its correction is one of the most practiced interventions in the world.** In the United States alone, 800,000 patients are subjected each year to inguinal hernia surgery, out of a total of 1,000,000 hernias (about 20,000,000 worldwide) represented by frequency of inguinal hernias, umbilicals, laparocoeles and femoral or crural hernias. The economic and social implications are therefore rather heavy, even in our country.

There are numerous surgical techniques of inguinal hernioplasty, in recent years they have particularly established the so-called tension-free techniques thanks to the use of biocompatible prostheses (alloplastic) that can be made of synthetic material (polypropylene, polyester, PTFE-e and composite) or biological (pig dermis, bovine pericardium).

The technique is not applicable to all patients and to all types of hernias but, in selected cases, allows an economic and operative time saving and, not foreseeing the use of artificial prosthetic material, eliminates the risks of infection, rejection or reaction periprosthetic sclerotic. Adverse events caused by the presence of prostheses alone are well known and feared: among many (infection, rejection, dislocation / migration), not infrequently, even chronic and non-treatable

pain that can justify the re-intervention and removal of what, in the end, has become a foreign body. The latter is a complex and delicate procedure, with not negligible health and social costs. The technique of Mohan P. Desarda is thus added to that range of surgical options, still allowing to adapt the choice of technique to the characteristics and situation of the individual patient, realizing a surgery designed on the anatomical characteristics of each ( *edm* ).

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University of Pisa  
Lungarno Pacinotti 43  
56126 Pisa  
PI 00286820501  
CF 80003670504

Contact center  
Tel +39 050 221 2111  
Fax +39 050 40834  
Student Green Number 800-018600  
University Certified Electronic Mail

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