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# Non-mesh Desarda Technique Versus Standard Mesh-Based Lichtenstein Technique for Inguinal Hernia Repair: A Systematic Review and Meta-analysis.

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## Abstract

BACKGROUND:The aims of the present systematic review and meta-analysis were to compare non-mesh Desarda technique with standard mesh-based Lichtenstein technique for inguinal hernia repair. METHODS:A systematic literature search for RCTs comparing between DT and LT was conducted using electronic databases and Google Scholar service. Studies were evaluated for recurrence and post-operative complications. We pooled the data using fixed effects model and random effects model after assessing the heterogeneity among the included studies. RESULTS:A total number of 8 RCTs studies were included in this meta-analysis with total number of 3177 patients divided between Desarda group and Lichtenstein group as follows: 1551 patients and 1,626 patients, respectively. There was no difference in terms of recurrence between the Desarda repair and Lichtenstein repair groups [P = 0.003], seroma [P = 0.0004] and surgical site infections (SSIs) [P = 0.04] in the Desarda group. CONCLUSION:DT and LT were found to have comparable results in terms of recurrence rate, haematoma formation, testicular atrophy and time to return to normal daily activity. DT is superior to LT in terms of reducing post-operative mesh-attributed complications, such as SSI and Seroma formation.

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