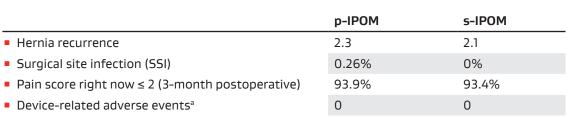
Postoperative outcomes and wound events in incisional hernia repair using hybrid mesh: Results from a prospective multicenter Italian study¹

Pizza et. al.

DATA SUMMARY -

- Follow-up: 24 months
- Prospective, multicenter
- All CDC Class 1 wounds
- Patients: 371
- Laparoscopic approach, fixated with permanent tacks
- Intraperitoneal placement
 - Standard IPOM ("s-IPOM"): 52.9%
 - IPOM+ ("p-IPOM"): 47.1%

QUALITY OUTCOMES



^a Includes mesh removals, mesh infections, erosion, exposure, migration, shrinkage, bowel obstruction and fistula.

PATIENT CHARACTERISTICS -

Mean defect area: 33.2 cm²

Defect width (4–10cm)

p-IPOM: 42.2%s-IPOM: 44.9%

- Mean BMI (kg/m2): 27.2
- Current smokers: 32.9%
- Hypertension: 32.3%
- Diabetes: 17.8%

Objective

The complexity of managing ventral hernias leads surgeons to explore different optimal techniques and mesh selection. Hybrid meshes, combining absorbable and permanent components, aim to balance long-term durability and infection risk. This study evaluated the extended-term outcomes of GORE® SYNECOR [I]ntraperitoneal (IP) [B]iomaterial for incisional hernia repair through minimally invasive laparoscopic techniques.

Materials and methods

Conducted across eight Italian surgery centers from January 2020 to September 2022, this multicenter analysis prospectively assessed the outcomes of patients undergoing laparoscopic repair of incisional hernias using GORE® SYNECOR [Intraperitoneal Biomaterial]. Outcomes included postoperative wound events, pain, recurrence, and mesh bulging.

Conclusions

Laparoscopic incisional hernia repair using GORE® SYNECOR [Intraperitoneal Biomaterial] hybrid mesh demonstrated satisfactory safety and efficacy regarding wound-related events and recurrence. Minor complications were more closely related to hernia sac size rather than the surgical approach, suggesting that the laparoscopic technique may optimize outcomes, particularly in elderly, smokers, and overweight patients.





Reference

hybrid mesh: results from a prospective multicenter Italian study. Hernia 2025;29(1):94.
Consult Instructions
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1. Pizza F, luppa A, Maida P, et al. Postoperative outcomes and wound events in incisional hernia repair using

