

Laparoscopies up for ventral hernia repair in obese patients

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Image courtesy of Blausen Medical

In obese patients, there has been a significant increase in the use of laparoscopic ventral hernia repairs, which are associated with a lower complication rate and shorter median length of hospital stay compared with open surgeries, according to research published online June 12 in *JAMA Surgery*.

(HealthDay)—In obese patients, there has been a significant increase in the use of laparoscopic ventral hernia repairs (VHRs), which are associated with a lower complication rate and shorter median length of hospital stay compared with open surgeries, according to research published online June 12 in *JAMA Surgery*.

Justin Lee, M.D., of Tufts University in Boston, and colleagues conducted a retrospective cohort analysis to evaluate the outcomes of laparoscopic surgery versus open surgery for VHR in [obese patients](#). Cases of obese patients who underwent VHR from 2008 to 2009 were identified in the Nationwide Inpatient Sample database.

The researchers found that the use of laparoscopic VHR increased more than four-fold, from 1,547 (6.5 percent) of 23,917 cases in 2008 to 6,629 (28.0 percent) of 23,704 cases in 2009. Compared with open repair, laparoscopic VHR was associated with significantly lower overall [complication rate](#) (6.3 versus 13.7 percent), shorter median length of hospital stay (three versus four days), and lower mean total [hospital charges](#) (\$40,387 versus \$48,513). Multivariate [logistic regression analysis](#) showed that the use of laparoscopic VHR was more likely in patients with private insurance (odds ratio [OR], 1.20) and less likely in patients with a gangrenous bowel (OR, 0.14).

"In the era of laparoscopy, the overall use of laparoscopic VHR in obese patients has increased significantly and appears to be safe, with a shorter stay and a lower cost of care," the authors write.

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