

# Real-World Experience of Totally Extraperitoneal Laparoscopic Inguinal Hernia Repair Using the Two-Port Technique

Ghassan Almaimani, MBBS, Facharzt (AC)\*,\*\*

## ABSTRACT

**Background and Aims:** As an alternative to standard three-port laparoscopic totally extraperitoneal (TEP) hernia repair, a two-port technique has been developed to improve cosmetic outcomes and reduce port-related morbidities. The aim of this study was to describe real-world operative outcomes of patients treated with two-port TEP.

**Design:** This was a retrospective observational study.

**Setting:** Tertiary care center.

**Methods:** This was a single-center study. The charts of 90 patients undergoing laparoscopic TEP repair between January 2021 and January 2022 via the two-port method were reviewed. Operative time, hernia type, postoperative complications, hospital stay, and days taken to resume regular activity were recorded. Patients were followed up to one year. Data were analyzed using descriptive statistics.

**Results:** The mean total operative time was 38.7 (SD 5.5) minutes. No significant procedural blood loss was observed in any case. One case converted to the TAPP technique but there were no conversions to open surgery. All patients were discharged on the day of operation. Two patients died from COVID-19 between 6 and 12 months, but otherwise there were no recurrences nor chronic pain in any patient.

**Conclusion:** Two-port TEP is safe, effective, and can be performed with minimal recurrences and chronic pain. Obtaining excellent results using this technique requires adequate surgical experience and expertise, careful patient selection, and precise knowledge of the anatomy.

**Keywords:** Inguinal hernia, laparoscopic TEP, mesh repair, two-port

*Bahrain Med Bull 2024; 46 (4): 2416-2419*

---

\* Consultant Surgeon, Assistant Professor  
Department of Surgery, Faculty of Medicine, Umm Al-Qura University  
Makkah, Saudi Arabia, Email: dr.gaam@gmx.de

\*\* Bergman Clinics Mathilden-Hospital, Büdingen, Germany.