Open Parastomal Hernia Repair with VERITAS Collagen Matrix

SURGICAL TECHNIQUE

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Introduction

Many surgeons feel that a parastomal hernia is an inevitable consequence of having a stoma, with reported hernia rates as high as 50%.\textsuperscript{1} Surgical intervention of the hernia is strongly indicated when the patient has clinical symptoms. Either pain, protrusion, obstruction or a poorly fitted appliance can lead to surgery. Multiple approaches for surgical intervention of a parastomal hernia in the literature include primary closure of the defect, relocation of the stoma site and reinforcement of the primary closure with mesh.\textsuperscript{2}

A growing body of evidence indicates that primary closure of the defect in combination with reinforcement of a mesh offers potential benefits such as lowered recurrence rates.\textsuperscript{3}
Operative Technique – Keyhole Technique

The following technique describes an open repair of a parastomal hernia using a keyhole technique.

Patient Preparation
• The abdomen is prepped and draped leaving the stoma exposed in the surgical field. A midline incision is created with care not to cause unnecessary enterotomies.
• Take down all adhesions and hernia contents in preparation for primary closure with 1 Vicryl or PDS suture.

• VERITAS is ready to use directly from the pouch.  

• Preparation of the “key hole” incision can be made in a “Y”, “Slit” or with “Cut Out” configuration.

• Below is a representation of the “Y” configuration. VERITAS is placed around the stoma, back to front, with elevation on the fascial edges. A tacker or suture can be used to secure VERITAS to the underlying fascia.
TIP FOR MESH PLACEMENT:

BEGIN BY TACKING OR SUTURING in the center of the BACK SIDE and fixate toward THE CORNERS LATERALLY.

- Wrap the mesh around the front. For most cases the 12 x 12 size can be used as it will allow a 4 cm wide overlap of mesh all around the bowel.\(^4\) Use enough tacks or sutures so all the mesh is adherent to the underlying peritoneum. VERITAS is pliable and is easily shaped around stomas of varying sizes.
Sugarbaker Repair

The following technique describes an open repair of a parastomal hernia using a Sugarbaker Technique.

**Patient Preparation**
- The abdomen is prepped and draped leaving the stoma exposed in the surgical field. A midline incision is created with care not to cause unnecessary enterotomies.
• Take down all adhesions and hernia contents in preparation for primary closure with 1 Vicryl or PDS suture.

• VERITAS is ready to use directly from the pouch.⁴

• A tacker or suture can be used to secure VERITAS to the underlying fascia. Select preferred fixation method, suture or tacking. Begin fixation on the LATERAL edge working medially.
INDICATIONS FOR USE:
VERITAS Collagen Matrix is intended for use as a prosthesis for urinary incontinence treatment, reconstruction of the pelvic floor, and repair of rectal or vaginal prolapse.

VERITAS Collagen Matrix is intended for use as an implant for the surgical repair of soft tissue deficiencies: abdominal and thoracic wall repair, muscle flap reinforcement and repair of hernias (e.g., diaphragmatic, femoral, incisional, inguinal, lumbar, paracolostomy, scrotal, umbilical).

VERITAS Collagen Matrix minimizes tissue attachment to the device in case of direct contact with viscera.

CONTRAINDICATIONS:
Use of VERITAS Collagen Matrix is contraindicated in patients with a known sensitivity to bovine material.

ADVERSE REACTIONS:
As with any surgical procedure, adverse reactions are possible.

Rx Only. For safe and proper use of this device refer to the complete instructions for use.

The recommendations mentioned here are based on general knowledge and clinical practice of Dr. Cohen. They are not to be considered medical advice and should not be substituted for individual clinical judgement.

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4. VERITAS Collagen Matrix Instructions For Use. 12847c 04/2011

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