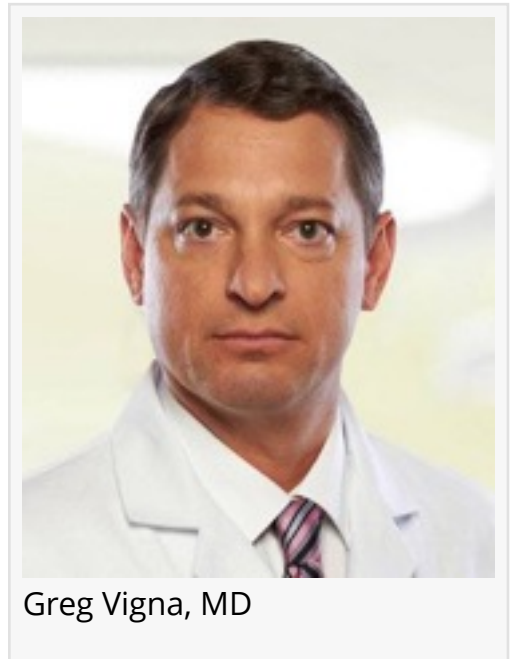


Twenty Percent Recurrence of Inguinal Hernia After Polypropylene Mesh Removal

Up to 12% of patients may develop chronic pain after inguinal hernia mesh repair—often linked to synthetic mesh and sometimes requiring revision surgery

SANTA BARBARA, CA, UNITED STATES, April 23, 2025 /EINPresswire.com/ -- "Up to 12% of patients undergoing minimally invasive inguinal hernia repair may develop chronic postoperative inguinal pain, possibly explained by the presence of mesh," states A.M. Chaoui, MD, surgeon.

What else did Dr. Chaoui say in his article "Inguinal hernia recurrence after laparoscopic mesh removal for chronic pain: A single-center experience with 11 years of practice" published in *Surgical Endoscopy* November 2024?:



Greg Vigna, MD

"Chronic postoperative inguinal pain (CPIP) may have a profound impact on quality of life leading to reduced activity, depression and anxiety, ultimately resulting in significant restrictions in social and professional activities in some patients.

Laparoscopic mesh removal for CPIP following preperitoneal inguinal hernia repair resulted in an inguinal hernia recurrence in one of five patients requiring remedial surgery in one in ten patients."

“

Phasix mesh is the elusive, safer alternative design for hernia mesh, as it works and provides a scaffold for native tissue to grow and is completely removed by the body."

Greg Vigna, MD

Read Dr. Chaoui's article:

<https://link.springer.com/article/10.1007/s00464-024-11354-0>

[Dr. Greg Vigna](#), national hernia mesh attorney, says, "The Phasix mesh is P4HB and a natural polymer derived from E coli. It is fully degradable and completely removed by the body over twelve to eighteen months. There doesn't

appear to be worse recurrence rates with this material when compared to polypropylene mesh. This is the elusive, safer alternative design for hernia mesh, as it works and provides a scaffold for native tissue to grow and is completely removed by the body. Surgery to remove mesh

should not be required after two years.”

Dr. Vigna concludes, “We are looking at early and late complications caused by synthetic polypropylene mesh, including adhesions with bowel obstructions and post-operative infections requiring surgery that are largely avoided with P4HB mesh. General surgeons who select polypropylene mesh are exposing their patients to unnecessary complications, including excessive scarification with pain and chronic pain requiring mesh revision. P4HB mesh is available for laparoscopic transabdominal preperitoneal inguinal hernia repair for both direct and indirect inguinal hernia repair.”

Read “A Novel Use of Fully Absorbable Phasix™ mesh for Laparoscopic Inguinal Hernia Repair”:
<https://pmc.ncbi.nlm.nih.gov/articles/PMC7434400/>

Dr. Vigna is a California and Washington DC lawyer who focuses on serious injuries caused by polypropylene hernia mesh. He represents those injured from defective hernia mesh and litigates these cases with the [Ben Martin Law Group](#), a national pharmaceutical injury law firm in Dallas, Texas.

[Click here](#) for a free book on Vaginal Mesh Pain.

Read Dr. Vigna’s book on birth injury: <https://vignallawgroup.com/mothers-guide-to-birth-injuries/>

Greg Vigna, MD, JD

Vigna Law Group

+1 8178099023

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