

Comparison of Bioabsorbable and Synthetic Mesh for Ventral Hernia Repair

Phasix P4HB mesh is fully absorbed by the body, lowering chronic pain and infection risk while matching polypropylene mesh in long-term outcomes

LOS ANGELES, CA, UNITED STATES, December 9, 2025 /EINPresswire.com/ -- "P4HB is a bioabsorbable mesh, meaning that the mesh is removed by the normal human immunological response over 18 months, and when compared with polypropylene Marlex mesh in ventral hernia repair, has comparable outcomes of risk of reoccurrence at three years," states [Greg Vigna, MD, JD](#), national product liability attorney.

Dr. Greg Vigna, hernia mesh attorney, says, "The Phasix mesh, made from P4HB, has properties that helps reduce the risk of chronic infection and chronic pain because it is naturally removed by the body."

Dr. Vigna adds, "P4HB mesh is fully biodegradable, completely resorbed by the body within 18 to 24 months. This eliminates the long-term presence of mesh in the body, reducing the risk of chronic mesh infections and pain. Long-term efficacy of this mesh has been further supported by evidence from the University of Pennsylvania Plastic Surgery Department."

What does Dr. John Fischer, MD, Plastic Surgeon, say in "Biosynthetic compared with synthetic mesh in retrorectus ventral hernia repair: A matched analysis with 3-year outcomes" published in *Surgery* 186 (2025)?:

"After matching, baseline characteristics, comorbidities, and transversus abdominus release use rates were comparable between groups; however, the biosynthetic group had a greater average defect size (220 cm² vs 141 cm²).

"Conclusion: In this matched cohort study, poly-4-hydroxybutyrate and uncoated polypropylene synthetic mesh demonstrated comparable long-term outcomes in retrorectus ventral hernia repair for clean wounds."



Dr. Greg Vigna



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Greg Vigna, MD, JD

Read Dr. Fischer's article:

<https://www.sciencedirect.com/science/article/pii/S0039606025004313>

Dr. Vigna adds, "Hernia mesh infections are serious medical complications that result in a prolonged recovery, and sometimes multiple procedures. Physicians who continue to implant polypropylene hernia mesh are exposing their patients to unreasonable risks of complications with no long-term benefits. Dr. John Fisher is

a plastic surgeon who specializes in abdominal plastic surgery and has all the skills needed for routine and complex repairs."

Dr. Vigna concludes, "Physicians who are selecting polypropylene mesh for ventral hernia repair are placing patients at an unreasonable, avoidable risk of chronic mesh complications that require mesh removal."

Complications of abdominal mesh and inguinal mesh infection include: 1) Chronic pain, 2) Mesh-enteric fistula, 3) Reoccurrence of hernia, 4) Sepsis, and 5) Septic shock. Treatments may include 1) Local debridement and VAC pack with antibiotics, 2) Partial mesh excision with antibiotics, 3) Complete mesh removal with antibiotics, and 4) abdominal wall reconstruction with or without mesh.

Dr. Vigna is a California and Washington, D.C., lawyer who focuses on serious injuries caused by defective devices, including Bard Hernia Mesh and Covidien Hernia Mesh. He represents the 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.

Watch weekly episodes of Justice with Dr. V on YouTube:

<https://www.youtube.com/@vignallawgroup>

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

<https://vignallawgroup.com/practice-area/hernia-mesh/>

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