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COMPARISON BETWEEN GENERAL AND SPINAL ANESTHESIA IN INGUINAL HERNIA REPAIR IN CLINICAL UNIVERSITY HOSPITAL "ST. NAUM OHRIDSKI" - SKOPJE

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ABSTRACT

Most often recommended treatment for inguinal hernia diagnosed patients is surgery. Generally, the surgical treatment includes several components: opening the subcutaneous fat by incision of the abdominal wall, mobilization of cord structures, dissection of weakened tissue and closure of inguinal canal with application of sterile synthetic mesh patch used to repair and decrease the tension in the weakened area of the abdominal wall after mobilization of hernia. Usually, the patient is given general or local anesthesia. General anesthesia is defined as controlled unconsciousness resulted from administration of one or more anesthetics followed by loss of protective reflexes and also known as medically induced coma. The administration of local anesthetics leads to reversible loss of sensation of separate part of the body achieved by blockade of nerve conductivity. Postoperative complications can occur in both types of anesthesia. The aim of this research is comparison between general and spinal anesthesia in inguinal hernia repair in Clinical University Hospital "St. Naum Ohridski" in Skopje, for the period from September to November 2014. Patients with diagnosed inguinal hernia were selected from surgical department and divided into two groups: patients treated with local anesthesia and patients treated with spinal anesthesia. The study group included 186 patients, 132 male and 54 female patients, generally diagnosed with direct hernia located on one side. Obtained results were based on comparison of adverse reactions detected in general anesthesia treated patients (94) and patients who undergo operation with spinal anesthesia (92). The incidence of postoperative complications was significantly higher in patients undergoing general anesthesia compared with patients treated with spinal anesthesia. The most common observed postoperative complications included: urinary retention, headache, nausea and vomiting, significantly more pronounced in smoker patients. According to the obtained results in this research, spinal anesthesia is recommended as first choice for treatment of inguinal hernia in patients.

