

Zone 2 of the Preperitoneal Space: 3-thirds Rule for the Standardization of MIS Techniques Inguinal Hernias Repair

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Abstract

The development of technical skills in laparoscopic/endoscopic repair of primary and incisional hernias requires specialized training from the surgeon.

Three dissection zones of the preperitoneal space have been established following the tactical proposal for the standardization of MIS techniques.

The aim of the paper is to describe the weak points of zone 2 using the 3-thirds rules.

Keywords: MIS Techniques; Laparoscopic; Hernias

Introduction

The development of technical skills in laparoscopic/endoscopic repair of primary and incisional hernias requires specialized training from the surgeon [1].

Three dissection zones of the preperitoneal space have been established following the tactical proposal for the standardization of MIS techniques (Figure 1) [2].

Figure 1: Three zones.

Zone 2: Is medial to inferior epigastric vessels and vas deferens and corresponds to the site of medial hernias (Figure 2) [2-4].

Figure 2: Zone 2.

An update of the myopectineal orifice nomenclature has recently been described. It is proposed to enlarge the femoral triangle and

include the disaster trapezoid in the classic anatomical description of MPO in women (Figure 3) [5].

Figure 3: Update.

The aim of the paper is to describe the weak points of zone 2 using the 3-thirds rules.

Topic development

In zone 2 of the preperitoneal space we can describe 3 weak points (Figure 4)

Figure 4: 3-thirds rules.

- **Upper third:** Medial hernia. (Hesselbach triangle)
- **Middle third:** Femoral hernia. (between the Lacunar Ligament and medial border of the femoral vein)

- **Lower third:** Obturator hernia. (delimited in its lower part by the obturator membrane/obturator muscles and in its upper part by the pubic branch).

Conclusions

The description of the 3-thirds rules contributes to a better interpretation of the anatomy of the different weak points in zone 2 of the preperitoneal space.

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