Surgical Treatment of Parastomal Hernias after Cystectomy and Ileal Conduit Urinary Diversion – A systematic review

Hernia, Dewulf M, Hildebrand ND, Bouwense SAW, Boucy ND, Muysoms F Maastricht UMC+, Maria Middelares Gent Corresponding author: dewulfmaxime@gmail.com

Appendix 2- Search strategy

Search in detail:

PubMed

17.12.2020:

((((((abdominal hernia[MeSH Terms]) OR (hernia[MeSH Terms])) OR (hernia)) OR (abdominal hernia)) OR (parastomal hernia[MeSH Terms])) OR (parastomal hernia)) AND ((((((((cystectomy[MeSH Terms]) OR (cystectomy)) OR (urinary diversion[MeSH Terms])) OR (urinary diversion)) OR (ileal conduit[MeSH Terms])) OR (ileal conduit))) OR (urostomy))

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(((((cystectomy) OR urinary diversion) OR ileal conduit) OR urostomy)) AND ((hernia) OR parastomal hernia)

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Results: 367

Imported to Endnote: 367

After removal of duplicates: 356

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((cystectomy or urinary diversion or ileal conduit or urostomy) and parastomal hernia).af.

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Search Information You searched: ((cytlectomy or urinary diversion or liea conduit or urostomy) and parastomal hemia) at.	1. Parastomal hernia repair with onlay mesh remains a safe and effective approach. De Robles NS, Young C.J. BMIC surgery 20 (1) (pp 296), 2020. Date of Publication: 24 Nov 2020. [Article]	Cor	tract Refer nplete Refe
Search terms used: cystectomy	Publisher NLM (Medine)		Find Citing

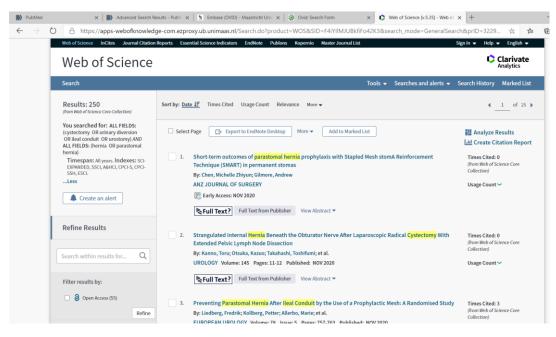
Results: 234

Updated to Endnote: 234

After removal duplicates: 128

Web of Science:

17.12.2020



Results: 250

Imported to Endnote: 250

After removal of duplicates: 58

ALL FIELDS: (cystectomy OR urinary diversion OR ileal conduit OR urostomy) AND ALL FIELDS: (hernia OR parastomal hernia)

CENTRAL database:

18.12.2020

(cystectomy OR urinary deviation OR ileal conduit OR urostomy) in Title Abstract Keyword AND parastomal hernia OR hernia in Title Abstract Keyword - (Word variations have been searched)

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	Title Abstract Keyword (cystectomy OR urinary deviation OR ileal conduit OR urostomy)				
	AND Title Abstract Keyword parastomal hernia OR hernia (Word variations have been searched)				
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	★ Clear all Filter your results Year Year first published Your first published 28 Trials matching (cystectomy OR urinary deviation OR ileal conduit OR urostomy) AND parastomal hernia OR hernia in Title Abstract Keyword - (Word variations have	al Answers More			

Results: 0 reviews, 28 trials

Imported to Endnote: 28

After removal of duplicates: 26

Clinicaltrials.gov

18.12.2020

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tatus E			Unknown †	Role of Mesh Stoma Reinforcement Technique (MSRT) in Prevention of Parastomal Hernia After Ileal Conduit Urinary Diversion	Conduit Parastomal 	Procedure: Polypropylene Mesh Stoma reinforcement technique with ileal conduit urinary diversion	Urology and N Mansoura, DK	
ecruitment 1 :	2		Terminated	Prevention of Parastomal Hernia by Mesh Placement		Procedure: Ileal conduit urinary diversion Device: Ethicon Physiomesh	University Of I	
 Recruiting Enrolling by invitation 	3		Has Results Active, not	Post-operative Hernias After Radical Cystectomy	Evisceration;	Procedure: Cystectomy	Miami, Florida Uhmontpellier	

Results: 6 trials

Imported to Endnote: 6

After removal of duplications: 6

Additional sources:

- European hernia society: Antoniou SA, Agresta F, Garcia Alamino JM et al (2018) European Hernia Society guidelines on prevention and treatment of parastomal hernias. Hernia 22:183–198.
- European hernia society: Congres abstracts 2019 & 2020: 2 abstract with subgroups -> sent e-mails: no additional data available
 - Laparoscopic treatment of parastomal hernias: a single center experience with the Pauli procedure M. Borshchigov, C. Gröger, e.a.
 - Parostomal hernias: a more and more surgical challenge J. A. Martín
- American hernia society: Congres abstracts 2019 & 2020: 1 abstract -> sent e-mail: article will follow soon
 - KEYHOLE VERSUS SUGARBAKER TECHNIQUES IN PARASTOMAL HERNIA REPAIR AT BRICKER CONDUIT: A RETROSPECTIVE NATIONWIDE COHORT STUDY WITH LONG-TERM FOLLOW-UP Elisa Mäkäräinen-Uhlbäck, MD ; Jaana Vironen, MD, PhD
- Systematic reviews:
 - Narang SK, Alam NN, Campain NJ, Pathak S, McGrath JS, Daniels IR, et al. Parastomal hernia following cystectomy and ileal conduit urinary diversion: a systematic review. Hernia. 2017;21(2):163-75.
 - DeAsis FJ, Lapin B, Gitelis ME, Ujiki MB (2015) Current state of laparoscopic parastomal hernia repair: a meta-analysis. World J Gastroenterol 21:8670–8677
 - Hansson BME, Slater NJ, Van der Velden AS, et al. Surgical techniques for parastomal hernia repair: a systematic review of the literature. Ann Surg. 2012;255(4):685–95.
 - Aquina CT, Iannuzzi JC, Probst CP, Kelly KN, Noyes K, Fleming FJ, Monson JR.
 Parastomal hernia: a growing problem with new solutions. Dig Surg. 2014;31(4-5):366-76. doi: 10.1159/000369279. Epub 2014 Dec 13. PMID: 25531238.

Screening by title:

Results in Endnote: 881

After removal of duplicates: 571+7 added based on references +3 from congress abstracts

After Screening by title: 130

Screening by abstract:

Results in Endnote: 127 (+3 conference abstracts)

Author	Inclusion	Reason for exclusion	References checked
Abaza 2015	No after	Inadequate study design	N/A
A . . .	abstract		21/0
Abdallah 2009	No after abstract	Not matching inclusion criteria	N/A
Aldaahm	Yes	Robot-assisted repair, 7 cases: conference abstract	None
2019	105	Robot assisted repair, 7 cases. contenence abstract	None
Amimi 2015	No after	Not machting inclsusion criteria	N/A
	abstract		
Ando 2020	No after	Insufficient patient number	N/A
	abstract		
Antor 2017	Yes	Laparoscopic repair, 9 cases: conference abstract	None
Avallone 2018	No after abstract	Not matching inclusion criteria	N/A
Ayuso 2020	Yes	Robot-assisted repair, 5 cases urostomy -	DeAsis 2015
Berger 2007	Yes	Laparoscopic repair, 66 patients; subgroup?	None
Berrevoet	No after	Insufficient patient number	N/A
2018	abstract	Net sucified 2	News
Bos 1996	Yes	Not available?	None
Bosanquet 2015	No after abstract	Inadequate study design	N/A
Castillo	No after	Not matching inclusion criteria	N/A
2006	abstract		
Craft 2008	Yes	Laparoscopic repair, 9 cases -> subgroup, older article, mixed techniques (keyhole and sugarbaker)	Steele 2003
Davis 2012	Yes	Laparoscopic repair, 11 cases; conference abstract, technique not specified	None
De Robles	Yes	Mesh repair vs relocation, 16 cases (subgroup); both	None
2020		techniques combined in results	
Deol 2003	No after abstract	Inadequate study design	N/A
Doddamani 2015	No after abstract	Not matching inclusion criteria	N/A
Donahue 2016	No after abstract	Not matching inclusion criteria	N/A
Dunet 2002	No after abstract	Inadequate study design	N/A
Elkarta 2020	No after abstract	Not matching inclusion criteria	N/A
Faba 2009	Yes	Conference abstract, different techniques, 28 cases	None
Faba 2011	Yes	Open repair, 19 cases	None
Farnham 2004	No after abstract	Not matching inclusion criteria	N/A

After screening by abstract: 42 (+3 conference abstracts)

Fei 2011	No after abstract	Insufficient patient number	N/A
Fischer 2017	Yes	3 mesh repair, 9 cases (subgroup?)	None
Fitzgerald 2017	Yes	Top hat repair, 22 cases	Smarts 2011
Franks 2001	Yes	Keyhole technique, 6 cases	None
Gadissa 2010	No after abstract	Inadequate study design	N/A
Ganga 2017	No after abstract	Inadequate study design	N/A
Garcia Rojo 2016	No after abstract	Inadequate study design	N/A
Gilbert 2013	No after abstract	Not matching inclusion criteria	N/A
Gosselink 2015	No after abstract	Inadequate study design	N/A
Gould 2003	No after abstract	Inadequate study design	N/A
Gupta 2020	Yes	Robotic sugarbaker repair, 5 cases	None
Hansson 2013	No after abstract	Insufficient patient numbers	N/A
Helal 1997	Yes	Mesh repair, 19 cases	
Hetet 2005	No after abstract	Not matching inclusion criteria	N/A
Ho 2004	Yes	Lateral approach repair, 15 cases	None
Holmes 2002	No after abstract	Not matching inclusion criteria	N/A
Hopkins 1982	No after abstract	Inadequate study design	N/A
Husain 2008	No after abstract	Inadequate study design	N/A
Hussein 2017	Yes	Robot vs open, 6 cases	None
Hussein 2016	No after abstract	Not matching inclusion criteria	N/A
Jaipura 2020	Yes	Robotic sugarbaker repair, 6 cases; conference abstract	None
Jeekel 2017	Yes	Conservatively vs surgery, 6 cases (subgroup)	None
Kasperk 2000	No after abstract	Not matching inclusion criteria	N/A
Kaufman 1983	No after abstract	Insufficient patient numbers	N/A
Khanna 2012	No after abstract	Not matching inclusion criteria	N/A
Knap 2004	No after abstract	Not matching inclusion criteria	N/A
Kotes 2018	Yes	Open with mesh, 23 patients; subgroup + conference abstract	None

K b . 2007			N 1/0
Kouba 2007	No after abstract	Not matching inclusion criteria	N/A
Kozlowski	No after	Insufficient patient numbers	N/A
2001	abstract		
Kroese 2018	Yes	Conservative vs surgery (subgroup?)	None
Lambrichts	Yes	Conference abstract; conservative vs surgery, 8 cases	None
2017		(subgroup)	
Lampel	Yes	Intraperitoneal slit mesh (new kind of mesh), ? cases	None
2012			
LeBlanc	No after	Insufficient patient numbers	N/A
2005	abstract		
Lee 2018	No after	Inadequate study design	N/A
	abstract		
Li 2019	No after	Not matching inclusion criteria	N/A
	abstract	-	
Liard 2001	No after	Not matching inclusion criteria	N/A
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Lima 2010	No after	Inadequate study design	N/A
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Maidaa	No after	Not matching inclusion criteria	N/A
2014	abstract		
Majumder	No after	Insufficient patient numbers	N/A
2016	abstract		
Mäkelä	No after	Not matching inclusion criteria	N/A
1997	abstract		
Malak 2017	No after	Inadequate study design	N/A
	abstract		
Marshall	Yes	Translocation?	None
1975			
McAllister	No after	Inadequate study design	N/A
2018	abstract		,,.
McLemore	Yes	Conventional vs laparoscopic, 19 cases (subgroup?)	Deol 2008
2007			
Mekhail	No after	Insufficient patient numbers	N/A
2017	abstract		
Mekhail	No after	Inadequate study design	N/A
2017	abstract		
Miller 2016	Yes	Retromuscular repair, 19 cases, conference abstract	None
Mirza 2008	No after		
111124 2008	abstract	Insufficient patient numbers	N/A
Mitchell	No after	Incufficiant nations numbers	NI/A
2011		Insufficient patient numbers	N/A
	abstract	Insufficient nationt numbers	
Mizrahi	No after	Insufficient patient numbers	N/A
2011	abstract	Incufficient actiont such as	N1/A
Mizrahi	No after	Insufficient patient numbers	N/A
2012	abstract		
Movassaghi	No after	Not matching inclusion criteria	N/A
2016	abstract		N1/2
Myers 2016	No after	Inadequate study design	N/A
	abstract		

Nomura 2003	No after abstract	Inadequate study design	N/A
2003 Olmi 2019	Yes	Keyhole repair, 7 cases (subgroup?)	None
Oma 2015	No after	Not matching inclusion criteria	N/A
01110 2017	abstract	Not matching metasion enterna	
Palanivelu	No after	Insufficient patient numbers	N/A
2017	abstract		,
Pfister 2020	No after	Not matching inclusion criteria	N/A
	abstract		
Raigani 2014	Yes	Relocation/mesh repair, 10 cases (subgroup?)	Rosen 2010
Rajapandian 2020	Yes	Laparoscopic keyhole repair, subgroup?	None
Ramalingam 2013	No after abstract	Inadequate study design	N/A
Ramalingam	No after	Inadequate study design	N/A
2014	abstract		
Rege 2019	No after	Insufficient patient numbers	N/A
	abstract		
Rezaee	No after	Not matching inclusion criteria	N/A
2020	abstract		
Rodriguez	No after	Duplication	N/A
2009	abstract		
Rodriguez	No after	Duplication	N/A
2011 Reghmann	abstract No after	Not motohing inclusion critoria	NI / A
Roghmann 2015	abstract	Not matching inclusion criteria	N/A
Romo 2015	No after	Inadequate study design	N/A
101110 2013	abstract		
Rosen 2010	No after	Not matching inclusion criteria	N/A
	abstract	5	,
Safadi 2004	Yes	Laparoscopic repair, 5 cases (subgroup?)	None
Sanseverino 2002	Yes	New technique, ? cases	None
Sanseverino 2002	No after abstract	Duplication	N/A
Shakir 2020	Yes	Robotic mesh repair, 7 cases; conference abstract	None
Sharma ?	Yes	Repair in general, 23 cases; conference abstract	None
Simeone	No after	Not matching inclusion criteria	N/A
2003	abstract		
Singh 2020	No after	Inadequate study design	N/A
0	abstract	, , 0	
Smart 2011	No after	Not matching inclusion criteria	N/A
	abstract		
Steele 2003	No after	Not matching inclusion criteria	N/A
	abstract		
Su 2020	No after	Not matching inclusion criteria	N/A
	abstract		
Sunaoshi	No after	Inadequate study design	N/A
2003	abstract		

Suwa 2016	No after	Insufficient patient numbers	N/A
	abstract		
Syan 2012	No after abstract	Not matching inclusion criteria	N/A
Talab 2018	No after abstract	Inadequate study design	N/A
Tan 2017	No after abstract	Inadequate study design	N/A
Tatay 2017	Yes	New technique, 6 cases (subgroup?)	None
Trunbull 2003	No after abstract	Inadequate study design	N/A
Tully 2017	Yes	Open repair, 27-40 cases; conference abstract	None
Tully 2019	Yes	Open repair, 27-40 cases	Duplication?
Van Ginkel 2019	No after abstract	Not matching inclusion criteria	N/A
Velazco 2016	Yes	Different techniques, 16 cases (subgroup?)	None
Von Bodman 2012	Yes	Mesh repair, 13 cases	None
Von Rundstedt 2014	No after abstract	Insufficient patient numbers	N/A
Wara 2016	No after abstract	Not matching inclusion criteria	N/A
Warren 2015	Yes	Retromuscular repair, 6 patients (subgroup?); conference abstract	None
Wood 2004	No after abstract	Not matching inclusion criteria	N/A
Yang 2017	No after abstract	Inadequate study design	N/A
Ypsilantis 2015	Yes	Sugarbaker repair, 15 cases (subgroup?)	None

Screening by full text:

Results in Endnote: 42 (+ 3 conference abstracts) After screening by full text: 6 (+conference abstracts/subgroup analyses)

(1) Author: Aldhaam NA, Elsayed AS 2019

Title: Minimally invasive management of robot-assisted radical cystectomy related complications: 15 years of experience
Journal: Journal of Endurology, *Conference abstract*: 37th World Congress of Endurology, Abu Dhabi

Patients: patients undergoing robot-assisted repair of cystectomy complications; *subgroup* of 7 patients with parastomal hernia

Intervention: Robot-assisted repair of any kind of complication requiring surgical repair after radical cystectomy

Clinical outcome: Need of surgical repair

E-mailed, no response.

EXCLUSION: conference abstract + subgroup: no additional/specific data available (not matching inclusion criteria)

(2) Author: Antor M, Schwarz L 2017

Title: Laparoscopic repair of parastomal hernia after radical cystectomy Journal: Hernia; *conference abstract*: 39th Annual International Congress of the European Hernia Society, Prevention and Prophylaxis beyond Hernia Surgery. Austria Patients: 9 patients undergoing laparoscopic repair for symptomatic parastomal hernia of ileal conduit

Intervention: Laparoscopic repair of urostomy incisional hernia; technique not specified; no complications occurred.

Clinical outcome: postoperative complications short-term and long-term, hospital stay operation time, recurrence

E-mail not available. EXCLUSION: conference abstract; no additional data available (not matching inclusion criteria)

(3) Author: Ayuso SA, Shao, JM 2020

Title: Robotic sugarbaker parastomal hernia repair: technique and outcomes
Journal: Hernia
Patients: patients requiring surgical repair for parastomal hernia, *subgroup* of 5 urostomy patients
Intervention: Robotic sugarbaker repair of parastomal hernia's;
Clinical outcome: operative time, intra-operative complications, length of stay,

postoperative complications, and recurrence

E-mailed, no response EXCLUSION: subgroup; no specific data available (not matching inclusion criteria)

(4) Author: Berger D, Bientzle M, 2007

Title: Laparoscopic repair of parastomal hernias: a single surgeon's experience in 66 patients Patients: patients undergoing laparoscopic repair in a single center; 1 ileal conduit patient Intervention: laparoscopic onlay mesh (sometimes 2 meshes) Clinical outcome: recurrence

EXCLUSION: insufficient patient number

(5) Author: Bos SD

Title: Incidence and therapy of parastomal hernia in urology **Journal:** Nederlands Tijdschrift voor Geneeskunde

EXCLUSION: review (inadequate study design)

(6) Author: Craft RO, Huguet KL 2008Title: Laparoscopic parastomal hernia repair

Journal: Hernia

Patients: patients undergoing laparoscopic repair of parastomal hernias; subgroup of 9 patients with ileal conduit
Intervention: sugarbaker or keyhole laparoscopic parastomal hernia repair
Clinical outcome: operative time, intra-operative complications, length of stay, postoperative complications (not stated how fast after surgery), recurrence

E-mail, no response. EXCLUSION: subgroup, no specific data available (not matching inclusion criteria)

(7) Author: Davis PJ, Klassen DR 2012

Title: Laparoscopic repair of parastomal hernias of ileal conduits **Journal** Surgical Endoscopy and Other Interventional Techniques; *Conference abstract*: 2012 Scientific Session of the Society of American Gastrointestinal and Endoscopic Surgeons (SAGES)

Patients: patients undergoing attempted laparoscopic repair of a ileal conduit parastomal hernia

Intervention: laparoscopic parastomal hernia repair, technique not specified **Outcome:** operative time, blood loss, length of stay, postoperative complications (none are described), recurrence

E-mail, dataset not available anymore. EXCLUSION: conference abstract; no additional data available (not matching inclusion criteria)

(8) Author: De Robles MS, Young CJ 2020

Title: Parastomal hernia repair with onlay mesh remains a safe and effective approach **Journal:** BMC Surg

Patients: patients undergoing relocation or mesh repair for symptomatic parastomal hernia, *subgroup* of 16 patients with ileal conduit

Intervention: either open relocation of mesh repair with peristomal or midline incision **Outcome:** mesh related complications, recurrence, operative time, length of stay

E-mail, no response. EXCLUSION: subgroup; no specific data available (not matching inclusion criteria)

(9) Author: Faba OR, Rosales, A 2011

Title: Simplified technique for parastomal hernia repair after radical cystectomy and ileal conduit creation

Journal: Urology

Patients: patients requiring surgical repair of ileal conduit parastomal hernia, 19 patients **Intervention:** ipsilateral relocation of the stoma

Outcome: operative time, length of stay, postoperative complications, recurrence

INCLUSION

(10)Author: Faba OR, Rosales A, 2009

Title: Post-radical cystectomy parastomal hernia repair: long-term follow-up
Journal: European Urology Supplements; conference abstract: 24th Annual Congress of the
European Association of Urology, Stockholm, Sweden
Patients: patients requiring surgical repair of ileal conduit parastomal hernia
Intervention: 19 patients ipsilateral relocation, 9 patients local fascia repair
Outcome: postoperative complications, operative time, recurrence

EXCLUSION: duplication (e-mail authors for 9 additional patients, no response)

(11)Author: Fischer I, Wundsam H, 2017

Title: Parastomal hernia repair with a 3D funnel intraperitoneal mesh device and same-sided stoma relocation: results of 56 cases
Journal: World journal of surgery
Patients: patients undergoing laparoscopic repair of parastomal hernia; *subgroup* with 7 ileal conduit patients
Intervention: Laparoscopic repair with mesh
Outcome: surgical complications, recurrence and treatment thereof

E-Mail, no response EXCLUSION: subgroup; no specific data available (not matching inclusion criteria)

(12)Author: Fitzgerald MJ, Ulrich S 2018

Title: Parastomal hernia repair using the "top hat" technique - An initial experience in 30 patients at Memorial Sloan Kettering Cancer Center
Journal: American Journal of Surgery
Patients: patients undergoing top-hat repair of a parastomal hernia; *subgroup* with 22 ileal conduit patients
Intervention: open top-hat repair of parastomal hernia
Outcome: operative time, postoperative complications, recurrence

E-Mail, no response. EXCLUSION: subgroup, no specific data available (not matching inclusion criteria)

(13)Author: Franks ME, Hrebinko RL, 2001

Title: Technique of parastomal hernia repair using synthetic mesh
Journal: Urology
Patients: 6 patients with ileal conduit parastomal hernia undergoing mesh repair
Intervention: supraperitoneal fascial closure and mesh repair
Outcome: recurrence, 'no infections', 'no stenoses'

INCLUSION

(14)Author: Gupta S, Rawal S, 2020

Title: Robotic intraperitoneal onlay graft hernioplasty for ileal conduit urinary diversion associated parastomal hernia

Journal: Journal of Urology; *conference abstract*: 2020 Annual Meeting of the American Urological Association. United States. Patients: patients requiring surgical repair of ileal conduit parastomal hernia Intervention: robotic intraperitoneal mesh repair Outcome: postoperative complications Clavien Dindo >2, operative time, length of stay

EXCLUSION: duplication (same as Jaipura 2020)

(15)Author: Helal M, Austin P, 1997

Title: Evaluation and management of parastomal hernia in association with continent urinary diversion Journal: J Urol Patients: 22 patients with symptomatic ileal conduit parastomal hernia Intervention: transabdominal approach with closure of fascia and reposition of stoma Outcome: recurrence, effect on pre-operative symptoms

INCLUSION

(16)Author: Ho KM, Fawcett DP 2004

Title: Parastomal hernia repair using the lateral approach Journal: BJU Int Patients: 15 patients with symptomatic ileal conduit associated parastomal hernia Intervention: lateral approach, closure of the defect, covered with mesh Outcome: recurrence

INCLUSION

(17) Author: Hussein A, Kozlowski J 2017

Title: Revisiting the abdomen after robot-assisted radical cystectomy: Tips and tricks for robot-assisted repair

Journal: Journal of urology; *conference abstract*: 112th Annual Meeting of the American Urological Association, AUA 2017. United States.

Patients: patients undergoing robotic/open repair of late post-operative radical cystectomy complications; *subgroup* of 4 vs 2 (robotic vs open) patients for ileal conduit parastomal hernia repair

Intervention: open vs robotic repair, not specified **Outcome:** failure of treatment?

E-mail, no response EXCLUSION: conference abstract + subgroup: no additional/specific data available (not matching inclusion criteria)

(18) Author: Hussein A, Hashmi Z 2016

Title: Reoperations following robot-assisted radical cystectomy: A decade of experience Journal: Journal of urology Patients: all patients undergoing surgical intervention after robotic assisted radical cystectomy, *subgroup* of only 4 patients with parastomal hernia Intervention: robotic-assisted mesh hernioplasty

Outcome: postoperative complications, time to operation, predictive factors of need for surgical intervention, hospital stay, blood transfusion

EXCLUSION: insufficient patient number

(19)Author: Jaipura J, Rawal SK 2020

Title: Robotic modified sugarbaker intraperitoneal onlay graft hernioplasty for ileal conduit urinary diversion associated with parastomal hernia
Journal: European Urology Open Science; *Conference abstract*: Urology Open Science.
Conference: EAU20 Virtual Congress and Theme Week
Patients: patients requiring surgical repair of ileal conduit parastomal hernia
Intervention: robotic intraperitoneal mesh repair
Outcome: postoperative complications Clavien Dindo >2, operative time, length of stay

E-Mail, no additional data available. EXCLUSION: conference abstract; no additional data available. (not matching inclusion criteria)

(20)Author: Jeekel J, Landin S 2017

Title: Surgical treatment versus watchful waiting in patients with parastomal hernia: A retrospective cohort study
Journal: Hernia; conference abstract: 18th Annual Hernia Repair. Mexico.
Patients: patients with parastomal hernia with any kind of stoma; 6 ileal conduit patients
Intervention: surgical treatment, versus watchful waiting
Outcome: symptoms, crossover rates, recurrence, postoperative complications, ER-admission

EXCLUSION: duplication (Lambrichts 2017 and Kroese 2018)

(21)Author: Kotes S, Greenwell T 2018

Title: Is obstruction of ileal conduit after parastomal hernia repair with porcine direved tissue matrix Stratice TM a valid concern? **Journal:** Journal of Clinical Urology; *conference abstract*: 2018 Annual Scientific Meeting of

the British Association of Urological Surgeons, BAUS 2018. United Kingdom **Patients:** patients with incisional or parastomal hernia after ileal conduit, *subgroup* of 23 patients with ileal conduit parastomal hernia

Intervention: open repair with lateral mesh fixation

Outcome: mesh-related complications, stoma related complications (obstruction), recurrence

E-mail, no response

EXCLUSION: conference abstract + subgroup: no additional/specific data available (not matching inclusion criteria)

(22)Author: Kroese LF, Lambrichts DPV, 2018

Title: Non-operative treatment as a strategy for patients with parastomal hernia: a multicentre, retrospective cohort study **Journal:** Colorectal Dis

Patients: patient with parastomal hernia with any kind of stoma; just 4 ileal conduit patients within the surgery treatment group
Intervention: surgical treatment, versus watchful waiting
Outcome: symptoms, crossover rates, recurrence, postoperative complications, ER-admission

E-Mail, no response EXCLUSION: subgroup, no specific data available. (not matching inclusion criteria)

(23)Author: Lambrichts DPV, Kroese LF 2017

Title: Surgical treatment versus watchful waiting in patients with parastomal hernia: A retrospective cohort study
Journal: Hernia; conference abstract: 39th Annual International Congress of the European Hernia Society, Prevention and Prophylaxis beyond Hernia Surgery. Austria
Patients: patient with parastomal hernia with any kind of stoma; 8 ileal conduit patients
Intervention: surgical treatment, versus watchful waiting
Outcome: symptoms, crossover rates, recurrence, postoperative complications, ER-admission

EXCLUSION: duplication (Jeekel 2017 and Kroese 2018)

(24) Author: Lampel A, Runkel N 2012

Title: Correction of parastomal hernia using meshes Journal: Urologe A Patients: patients requiring surgical repair of parastomal hernia after ileal conduit, n=3 Intervention: open repair with sublay mesh placement Outcome: recurrence

EXCLUSION: insufficient patient numbers

(25)Author: Marshall FF, Leadbetter WF 1975

EXCLUSION: not available online -> not matching inclusion criteria

(26)Author: McLemore EC, Harold KL, 2007

Title: Parastomal hernia: short-term outcome after laparoscopic and conventional repairs **Journal:** Surg Innov;

Patients: all patients requiring parastomal hernia repair; *subgroup* of 17 ileal conduit patients

Intervention: open (primary suture, mesh, relocation) or laparoscopic (sugarbaker, keyhole) repair of any kind of symptomatic parastomal hernia

Outcome: postoperative complications, operative time, recurrence

EXCLUSION: duplication (subgroup), same as No 6

(27)**Author:** Miller HJ, Majumder A, 2016 **Title:** Retromuscular repair of parastomal hernias in the setting of ileal conduit: outcomes and special considerations

Journal: Journal of the American college of surgeons; *conference abstract* 2nd Owen H Wangensteen Scientific Forum. United States

Patients: patients who underwent retromuscular repair of parastomal hernias of ileal conduit; 19 patients

Intervention: retromuscular repair with mesh

Outcome: postoperative complications, mesh related complications, recurrence

E-mail not available. EXCLUSION: conference abstract; no additional data available (not matching inclusion criteria)

(28)Author: Olmi S, Oldani a 2019

Title: Laparoscopic modified keyhole technique with coated polyester mesh for treatment of parastomal hernia: measures for improving the outcome
Journal: J Laparoendosc Adv Surg Tech A
Patients: patients requiring surgical repair for parastomal hernia, *subgroup* of 9 ileal conduits
Intervention: keyhole technique with parietex or physiomesh
Outcome: postoperative complications, recurrence, mesh related complications

E-Mail, no response.

EXCLUSION: subgroup; no specific data available (not matching inclusion criteria)

(29) Author: Raigani S, Criss CN 2014

Title: Single-Center Experience With Parastomal Hernia Repair Using Retromuscular Mesh Placement

Journal: Journal of Gastrointestinal Journal

Patients: all patients requiring repair for parastomal hernia at a single center ; subgroup of 10 ileal conduit patients

Intervention: retromuscular approach utilizing a posterior component separation with relocation to contralateral abdominal wall

Outcome: postoperative wound complications, length of follow-up and hernia recurrence

E-Mail, no response

EXCLUSION: subgroup; no additional data available (not matching inclusion criteria)

(30)Author: Rajapandian S, Jankar SV, 2020

Title: Modified laparoscopic keyhole plus repair to manage a parastomal hernia: A single-center experience.

Journal: Asian J Endosc Surg

Patients: patients with symptomatic parastomal hernia requiring repair, 3 ileal conduits **Intervention:** laparoscopic modified keyhole repair

Outcome: perioperative outcomes such as operative time, hospital stay, postoperative complications, recurrence

EXCLUSION: insufficient patient numbers

(31)Author: Safadi 2004

Title: Laparoscopic repair of parastomal hernia: early results Jourrnal: Surg Endosc Patients: patients with symptomatic parastomal hernia of any stoma, 5 ileal conduit Intervention: laparoscopic mesh repair Outcome: postoperative complications, recurrence, operative time

INCLUSION: patient details are given for all 5 ileal conduit patients

(32)Author: Sanseverino RC, Zucco F

Title: Marlex of Prolene mesh repair of parastomal hernia in a patient with Bricker urinary diversion

Patients: 4 patients undergoing parastomal hernia repair **Intervention:** semicircular incision around stoma with interposition of mesh

EXCLUSION: insufficient patient numbers

(33) Author: Shakir A, Ghoreifi A, 2020

Title: Feasibility, technique and perioperative outcomes of robotic parastomal hernia repair with biologic meh after cystectomy and ileal conduit diversion **Journal:** Journal of urology; *conference abstract*: 2020 Annual Meeting of the American Urological Association. United States.

Patients: 7 patients undergoing robotic repair for parastomal hernia after ileal conduit urinary diversion

Intervention: robotic keyhole repair

Outcome: postoperative 90-day complications, intraoperative complications, operative time

E-Mail, no additional data available. EXCLUSION: conference abstract; no additional data available. (not matching inclusion criteria)

(34)Author: Sharma DM, Mishra V 2009

Title: Long term outcome of parastomal hernia repair in patients treated for benign urological disease.

Journal: BJU International; conference abstract: British Association of Urological Surgeons 2009 Annual Scientific Meeting. Glasgow United Kingdom

Patients: undergoing repair for parastomal hernia after benign indication for urinary diversion; *subgroup* 20 ileal conduit patients, 3 continent urostoma
Intervention: parastomal hernia repair, not specified
Outcome: rate of complication, recurrence

E-Mail, no response

EXCLUSION: conference abstract + subgroup; no specific/additional data available (not matching inclusion criteria)

(35)Author: Tatay F, Anoro M, 2016

Title: New technique for parastomal hernia repair: "IVO technique"
Journal: Hispoanoamericana de Hernia; Spanish article
Patients: patients requiring parastomal hernia repair; *subgroup* of 9 ileal conduit patients
Outcome: feasibility?

E-mail not available. EXCLUSION: subgroup, no specific data available. (not matching inclusion criteria)

(36)Author: Tran H, Turingan I, 2014

Title: Single-port laparoscopic parastomal hernia repair with modified sugarbaker technique Journal: Journal of the Society of Laparoendoscopic surgeons Patients: patients requiring parastomal hernia repair, *subgroup* of 4 ileal conduit repairs Intervention: modified sugarbaker repair

Outcome: recurrence, interoperative complications, postoperative complications, length of stay

EXCLUSION: insufficient patient numbers

(37)Author: Tully K, Von Bodman C 2017

Title: Evaluation of a novel three-dimensional funnel mesh for parastomal hernia repair after ileal conduit diversion

Journal: Journal of Urology; *conference abstract*: 112th Annual Meeting of the American Urological Association, AUA 2017. United States **Patients:** 40 patients with clinically significant hernia after ileal conduit

Intervention: reduction of hernia sac, followed by mesh placement **Outcome:** postoperative complications, recurrence

EXCLUSION: duplication (Tully 2019)

(38)Author: Tully KH, Roghmann F 2019

Title: Parastomal hernia repair with 3-D Mesh implants after radical cystectomy and ileal conduit urinary diversion – A single center experience using a purpose made alloplastic mesh implant

Journal: Urology

Patients: 40 patients with clinically significant hernia after ileal conduit **Intervention:** reduction of hernia sac, followed by mesh placement **Outcome:** postoperative complications, recurrence

INCLUSION: 40 patients undergoing repair

(39)Author: Velzaco C, Garvey E, 2016

Title: Laparoscopic parastomal hernia repair: a single center updated review **Journal:** Hernia; *conference abstract*: 17th Annual Hernia Repair. Washington, DC United States

Patients: patients undergoing laparoscopic parastomal hernia repair at a single center; *subgroup* of 16 ileal conduit repairs

Intervention: sugarbaker/keyhole/relocation **Outcome:** postoperative complications, intraoperative outcomes, recurrence

EXCLUSION: duplication (+ subgroup), same as No 6

(40)Author: Von Bodmann C, Brock M, 2012

Title: Parastomal hernia repair following ileal conduit urinary diversion using a novel funnel mesh implant
Journal: Journal of Urology; *conference abstract*: 2012 Annual Meeting of the American Urological Association, AUA. Atlanta, GA United States.
Patients: 13 patients with parastomal hernia after ileal conduit
Intervention: novel mesh implant specifically designed with a central penetration point and funnel for intestinal parts aiming to minimize penetration; intraperitoneal sublay
Outcome: recurrence, postoperative complications

E-Mail, no additional data available. EXCLUSION: conference abstract; no additional data available (not matching inclusion criteria)

(41) Author: Warren J, Grant A 2015

Title: Open retromuscular repair of parastomal hernias Journal: Diseases of the colon and rectum; *conference abstract*: Annual Meeting of the American Society of Colon and Rectal Surgeons, ACSRS 2015. Boston Patients: patients with symptomatic parastomal hernia; 11% (+-7) ileal conduit Intervention: retromuscular repair Outcome: surgical site infection, surgical site occurrence, hernia recurrence

E-Mail, too few additional data available. EXCLUSION: conference abstract + subgroup; (not matching inclusion criteria)

(42)Author: Ypsilantis E, George M, 2015

Title: Outcome of parastomal hernia repair with a modified sugarbaker technique **Journal:** colorectal disease; *conference abstract*: 10th Scientific and Annual Meeting of the European Society of Coloproctology. Dublin Ireland.

Patients: patients requiring hernia repair at a tertiary center, *subgroup* of 15 ileal conduit patients

Intervention: modified sugarbaker technique **Outcome:** postoperative morbidity, recurrence

E-Mail, no response EXCLUSION: conference abstract + subgroup; no additional/specific data available (not matching inclusion criteria)

(43)41st Annual Congress of the European Hernia Society: Evidence, Innovation, Education; September 11–14, 2019—Hamburg, Germany:
Author: Martin, J. A.
Title: Parostomal hernias: a more and more surgical challenge Journal: presented at the 41st Congress of the European Hernia Society Patients: 60 patients who underwent surgery for parastomal hernia, *subgroup* of 12 ileal conduit patients Intervention: eventroplasty with Dynamesh IPST implant, 3D-preshaped mesh Outcome: recurrence, safety

E-mail, no additional data available. EXCLUSION: conference abstract + subgroup; no additional/specific data available. (not matching inclusion criteria)

(44)41st Annual Congress of the European Hernia Society: Evidence, Innovation, Education; September 11–14, 2019—Hamburg, Germany:

Author: Borshchigov, M., Gröger, C.

Title: Laparoscopic treatment of parastomal hernias: a single center experience with the Pauli procedure

Patients: patients requiring surgery for parastomal hernia, *subgroup* of 6 patients with urostomy

Intervention: laparoscopic Pauli procedure in 5 patients

Outcome: postoperative hospital stay and operative time, complications

E-Mail, no additional/specific data available

EXCLUSION: conference abstract + subgroup; no additional/specific data available. (not matching inclusion criteria)

(45) American Hernia Society Annual Meeting 2020:

Author: Mäkäräinen-Uhlbäck, E., Vironen, J.
Title: Keyhole versus Sugarbaker techniques in parastomal hernia repair at bricker conduit: a retrospective nationwide cohort study with long-term follow-up
Patients: patients requiring primary repair of a ileal conduit parastomal hernia, 34 patients
Intervention: Keyhole (n=25), Sugarbaker (n=6)
Outcome: primary outcome was parastomal hernia recurrence, secondary outcomes were

complication and reporation rate

E-Mail, full article will be published in near future EXCLUSION: conference abstract, no additional data available (not matching inclusion criteria)