

e newsletter 2025
www.herniasocietyofindia.org ISSUE

HERNIA TODAY



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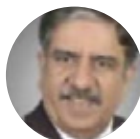
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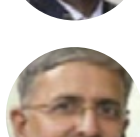
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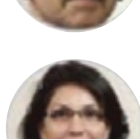
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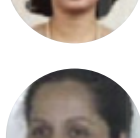
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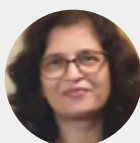


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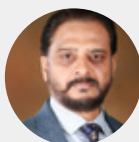


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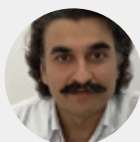


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MESSAGES FROM THE EXECUTIVE DESK

MESSAGE from the **President's Desk**



Dear Friends in Herniology,
Greetings !

I am incredibly honoured, humbled and grateful to each one of you for trusting me to serve this esteemed organization, “Hernia Society of India” as President for 2023-2025.

HSI is the largest national chapter affiliated to APHS and is very active in promoting safe, effective and high quality hernia surgery and also in executing education and training programmes in Hernia Surgery. I sincerely thank Dr. Pradeep Chowbey, Dr. Anil Sharma, Dr. Rajesh Khullar for their constant guidance in academic events to achieve goals of mission. Friends we all can feel proud about our accomplishment over the last two years.

In the beginning we decided to organise at least one single-theme workshop in a month. Finally we achieved more than the targeted goal. List of scientific activities/workshops is displayed in this newsletter.

We had regular episodes of our webinar series “Technical Tips by the Titans” and was very much popular. Another series “What’s in the case” was active throughout and we had good discussions and suggestions amongst our colleagues. Research activity “Indian Hernia Collaborations” have collected impressive data and are in process of publications. I am thankful to Dr. Randeep Wadhwan and team for their sincere efforts.

We had very well organized annual events “Young HSICON” organized by Dr. Tarun Mittal and team. The Annual conference of HSI organized under leadership of Dr. Ashutosh Soni at Indore and the Midterm conference at Aligarh by Dr. Mohd Yusuf. All the conferences were very meticulously organized and successful. I congratulate all of them.

We also had opportunity to represent HSI at various international conferences like APHS at Penang, Singapore, EHS at Prague and EHS Paris. One of our focus was on giving more opportunities for young surgeons. This goal was also achieved to the satisfaction. We have recognised new centers as “Center of Excellence” in Hernia Surgery. I sincerely congratulate all the lead faculties and centers who have shown interest in the ‘Center of excellence’. I am happy that many surgeons are taking benefit of these centers for improving their skills and understanding ‘Hernia’.

There has also been significant increase in our membership. Many new members have been added in our fold. I welcome all new members and look forward for their active participation for growth of the society.

I am extremely thankful to Dr. Deepraj Bhandarkar, our immediate Past-President, Dr. Sarfaraz Baig, Secretary HSI and Dr. Sumeet Shah, Treasurer who constantly guided me, and also participated actively in all events.

All vice presidents Dr. Makhan Lal Saha (Kolkata), Dr. Jintendra Chawla (Jaipur), Dr. Vandana Soni (New Delhi), Dr. Ganesh Shenoy (Bangalore) & Dr. Ashutosh Soni (Indore) and all Executive Council members and all members of Hernia Society extended their cooperation and active participation. I am indeed grateful to all of them. As the calendar year turns to next year Dr. Manish Baijal will take over responsibilities as President HSI. I am sure under leadership of Dr. Manish Baijal coming years will be more amazing, full of energy, fellowship and friendship.

Dr. Ashish Dey and his team have taken great efforts for this newsletter. I sincerely appreciate and congratulate them.

I would be happy to serve the society in the same spirit, energy & look forward for your friendship forever.

Best Wishes for coming years.

Dr. Vijay Borgaonkar

President, Hernia Society of India

Secretary's Report – **Hernia Society of India**



It gives me immense pleasure to present this report as I conclude my tenure as the Secretary of the Hernia Society of India. Over the past term, I have had the privilege of working with a vibrant and committed team, whose energy and dedication have been the cornerstone of our collective progress.

The last two years have been remarkable, with numerous activities and initiatives conducted across the country. From Srinagar to Bangalore, and Mumbai to Kolkata, we have reached out to nook and corner of the country. From academic workshops and conferences to awareness programs, our efforts have reached both surgeons and patients, ensuring the spread of knowledge, innovation, and best practices in hernia care.

One of the most heartening developments has been the enthusiastic participation of our young members. I find huge pleasure in naming them here and look at them as our future leaders - Dr Pallawi Priya, Dr Mandar Gadgil, Dr Ganesh Shenoy, Dr Yusuf Afaque, Dr Nidhi Khandelwal, Dr Harsh Sheth, Dr Vishal Soni, Dr Magan Mehrotra, Dr Shivanshu Mishra, Dr Ashish Dey, Dr Ashwin Thangavelu, Dr Sarvana Kumar, Dr Pinak Dasgupta, Dr Mansimrat Singh, Dr Omar Tabrez, Dr Kumar Sonal, Dr Mahak Bhandari, Dr Sudesh Sharda, Dr Ishant Chaurasia, Dr Priyank Chelawat, to name a few. Their contributions have brought fresh ideas and momentum, setting the foundation for a bright future for our society. Their active involvement signifies a strong and promising path ahead, with both patients and surgeons standing to benefit from their efforts.

We have two flagship web based academic activities – “**What's in the Case?**” where surgeons from across the country present an interesting case that is then discussed by the chairpersons – and “**Titan Series**” where global stalwarts present their innovative techniques. Both are hugely attended and widely appreciated.

There were two travelling fellows sponsored by Hernia Society of India – Dr Shivanshu Mishra and Dr Yusuf Afaque, who visited COEs in Europe and shared their experience with the members.

The post of Secretary also came with opportunities to travel. In the last two years I have been invited for keynote lectures to Japan and Malaysia and have delivered invited talks in the World Congress at Singapore and in the EHS 2024 and EHS 2025 at Prague and Paris respectively. I was fortunate to have made friends globally and witness different cultures. I am mesmerized with the beauty of Old Prague, stylishness of Paris, cosmopolitan culture of Singapore, the confluence of ethnicity and modernism in Malaysia, and the grace and poise of the Japanese people. These travels have exposed me to surgeons of deep resolution, innovation and commitment, and I get so inspired. As always, there is so much to learn and imbibe from everyone.

I have also made inward journeys in these last few years, and it has been fascinating. While the academic world is all about intellect, the inner exploration is all about being overawed in witnessing its limitations. It is difficult to express such sentiments through prose and therefore a poetry may make it easier to convey the message. I know that such expressions may not appear to be in sync with that of a scientific mind but not presenting my inner thoughts would also be denying my authenticity. So here goes -

INTELLECT by Dr Sarfaraz Baig

**Are you afraid
Of giving up what you know?
Because your intellect
Is what makes you think so**

**But your intellect can see the Sun
Hanging in the sky
Burning and yet never melting
And you don't know why**

**Your breath is connected
To the Air you cannot see
And yet this provides Life
On Land and even in the Sea**

**You cannot predict
The colour of the flower by looking at the Seeds
And how a forest grows from nowhere
Who provides it what it needs**

**And how do you account for the sweetness
Of the Dates growing in the Desert sand?
What makes one fruit sweet
And why another bland?**

**How do you awaken
When you are lost in the deep
Who is alive
When you are asleep?**

**And can your mind unlock
The concept of Eternity?
Can it imagine
The boundary of Infinity?**

**So, temper your cleverness
And stay in wondrous delight
And do not assume what you know
Is complete or even right**

As I step down from this role, I do so with great satisfaction and confidence. I am certain that those who follow will continue this journey with even greater vision and dedication, taking the Hernia Society of India to new heights. It has been an honor to serve, and I will always remain a well-wisher and supporter of the society's endeavors.

This report would be incomplete without my gratitude to our President, Dr Vijay Borgaonkar, Dr Deepraj Bhandarkar, immediate past President, Dr Sumeet Shah, our Treasurer, Dr Manish Baijal, the incoming President for their advices and support without which I couldn't have functioned smoothly.

Obliged and grateful
Sarfaraz

MESSAGE from the **Founder President, APHS**



Dear Colleagues,

It is with great enthusiasm and unwavering support that I write to you today regarding the latest issue of the HSI Newsletter dedicated to advancing knowledge and awareness about hernia care.

As the Founder President of APHS, I have always been deeply committed to improving patient outcomes and advancing medical knowledge in the field of hernia treatment. Our mission has always been to support both the medical community and patients by providing the most accurate, up-to-date, and actionable information available. In this context, the creation of a specialized newsletter focused on hernias represents a significant step forward in fulfilling this mission. The HSI Newsletter stands to be an invaluable resource, bringing together insights from leading experts, innovative research findings, and practical guidance on the management and treatment of hernias. This publication will not only enhance the knowledge base of healthcare professionals but also empower patients with the information they need to make informed decisions about their care.

Our organization has long recognized the complexities involved in hernia treatment, including the challenges of diagnosis, the intricacies of surgical interventions, and the importance of post-operative care. The HSI Newsletter will address these topics with the depth and clarity they deserve, fostering a community of practice that is informed, engaged, and continually evolving.

I would like to extend my heartfelt congratulations to the editorial team and contributors of the Newsletter. Your dedication and expertise are crucial to the success of this initiative. I am confident that your efforts will significantly enhance the dialogue surrounding hernia care and contribute to the overall advancement of this important field.

As we move forward, I encourage you to continue to seek out the latest research, explore innovative approaches, and maintain the highest standards of excellence in your work. The Newsletter has the potential to become a cornerstone of hernia education, and I am honored to support it wholeheartedly.

Thank you for your commitment to this endeavor. I look forward to the positive impact the HSI Newsletter will undoubtedly have on the field of hernia care.

With best regards,

Dr. Pradeep Chowbey

Founder President – Asia Pacific Hernia Society (APHS)

Chairman – Max Institute of Laparoscopic, Robotic and Bariatric Surgery

Max Super-Speciality Hospital, New Delhi, India

MESSAGE from the **President, APHS**



Dear Colleagues and Friends,
Season's Greetings!

21 years ago, Asia Pacific Hernia Society was established in 2004 in Bali, Indonesia with like-minded hernia surgeons from Asia. Building on the strong foundation laid by our predecessors, APHS is committed to promote excellence in hernia care, fostering collaboration and driving innovations.

Hernia society of India (HSI) was formed in 2006 by group of eminent Hernia Surgeons of India under the leadership of Prf. H.G. Doctor as Founder President. HSI become member society of APHS in 2006 only. At present, Indian Hernia surgeons have maximum representation in APHS through HSI.

20th Annual Congress of the Asia Pacific Hernia Society (APHS) and 19th Annual Congress of Hernia Society of India (HSI) is being held at JW Marriott, Aero city, New Delhi from 18th to 20th Sept 2025.

Eminent International Faculty have consented to grace the occasion. The scientific program is being carved with delegates in mind.

I am sure that every delegate and faculty will enrich themselves with a memorable scientific deliberation and also strengthen bonds of camaraderie and collaboration across geographical boundaries.
Together let us strive for excellence in hernia care and improve the lives of our patients.

Warm regards

Dr. Rajesh Khullar
President, Asia Pacific Hernia Society (APHS)
Past President, Hernia Society of India (HIS)

MESSAGE from the **President Elect, HSI**



Dear HSI Members,

It gives me great pleasure to connect with you once again through this edition of the Hernia Society of India Newsletter.

The past year has been one of continued progress, collaboration, and academic growth for our society. We've witnessed remarkable engagement and participation across multiple platforms — a true reflection of the collective commitment of our members.

Our Annual Conference in Indore, under the leadership of Dr. Ashutosh Soni was both exemplary in scientific content and execution. HSI also proudly hosted multiple zonal meetings and conferences all over the country over the year.

Our popular webinar series “Technical Tips by the Titans” continued to receive wide appreciation, while “What’s in the Case” kept our members intellectually stimulated with insightful discussions and practical learnings. I thank all contributors who made these series a resounding success.

Looking ahead, we are excited to host the 20th Annual Congress of the Asia Pacific Hernia Society (APHS) in conjunction with the 19th Annual Congress of HSI from 18th to 20th September 2025 at JW Marriott, Aerocity, New Delhi. With the presence of eminent international faculty and a thoughtfully curated scientific agenda including pre congress courses, we promise an experience that will enrich, inspire, and foster collaborations beyond borders.

Together, let us continue to push the boundaries of excellence in hernia care and make a lasting impact on the lives of our patients.

Warm regards,

Dr. Manish Baijal

President Elect – HSI

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MESSAGE from the **Treasurer's** desk



Dear Delegates & Friends,
It gives me immense pleasure to welcome you all to this very special occasion.

It is a matter of great pride and honour for the Hernia Society of India (HSI) to host the Asia Pacific Hernia Society (APHS) Meeting here in New Delhi. We are delighted to have so many esteemed colleagues, friends, and mentors gathered together to share knowledge, exchange ideas, and celebrate surgical excellence.

At HSI, we remain committed to fostering continuous learning and professional development.

Throughout the year, we organize a range of academic activities and offer multiple platforms to engage with our growing community of hernia surgeons across India and beyond.

As part of this effort, we launched a popular online educational series titled “Technical Tips from Titans.”

This initiative brings global expertise directly to our members, and over the past year, we’ve been privileged to host several world-renowned speakers:

Prof. Todd Heniford shared his insights on the “Preperitoneal Technique for the Repair of Large Complex Hernias.”

Prof. Sean Orenstein presented on “Choosing the Optimum Mesh.”

Dr. Hector Valenzuela recently spoke on the innovative “PeTEP – The Extended Preperitoneal Repair of Ventral Hernia.”

All these sessions are available on the HSI YouTube Channel, which now features over 300 videos and has nearly 2,000 subscribers. The content is meticulously categorized for easy navigation, making it a valuable resource for surgeons at all stages of their careers.

I warmly encourage each of you to visit, like, and subscribe to the channel — and share it with your colleagues.

HSI also hosts a thriving Facebook Group with more than 4,400 surgeon members, including many from across the Asia-Pacific region. This interactive platform encourages members to post operative videos, discuss clinical challenges, promote academic events, and share opportunities. It truly embodies the spirit of open collaboration and community learning.

We are also active on X (formerly Twitter) at @herniaindia, with a growing community of followers. X has become a dynamic space for real-time engagement with global hernia experts and societies like AHS and EHS — and we invite you to follow us there for timely updates and discussions.

In addition, we encourage you to connect with HSI on Instagram and LinkedIn, where we share news about workshops, webinars, fellowships, and other academic initiatives.

In today’s connected world, growth comes through collaboration, visibility, and mentorship.

At HSI, we remain deeply focused on supporting hernia surgeons in India and championing the progress being made in our field — both in terms of technique and technology.

As we come together for this landmark meeting, I once again extend a warm welcome to all of you. Thank you for being part of this journey with us.

With best wishes,

Dr. Sumeet Shah

Treasurer - HSI

On behalf of the Hernia Society of India

MESSAGE from the **The Editor's Desk**



Warm Greetings from Hernia Society of India.

Dear Reader

It gives me great pleasure in bringing to you yet another edition of 'Hernia Today', the official newsletter of 'Hernia Society of India'. A year of extraordinary academic activities has happened from the hugely successful HSIcon 2024 in Indore to the APHS-HSIcon 2025 in Delhi, where this newsletter is being released. We hope this annual conference will be a resounding success as it has brought together leading world experts in the field of hernia surgery.

Under the presidency of Dr Vijay Borgaonkar, and our dynamic Secretary, Dr Sarfaraz J Baig, we have witnessed a seamless transition of responsibilities and exponential increase in academic activities for the society. The aim of this newsletter is to share all our activities, events and growth of HSI as an inclusive academic Society. The past events are published and the upcoming events are notified for the benefit and attendance of our junior colleagues to their fullest potential.

A few landmark events and innovations have happened in the last academic year. All the academic events, both physical and online are collated in this newsletter. Abstract light readings and 'Life beyond Surgery' are also encouraged here. HSI Facebook page, Youtube and other Social media handles, managed by Dr Sumeet Shah and Dr. Nidhi khandelwal are mentioned. Robotic telesurgery by leading hernia surgeons also proudly get the space here.

We encourage all members to contribute to our upcoming publications. Your experiences and insights are invaluable, and sharing them can inspire fellow surgeons and enhance our collective knowledge. Whether you wish to write an article, share a case report, or contribute to our research initiatives, your participation is crucial. As we continue to grow in membership strength, I take this opportunity to welcome all new members and invite one and all to be a part of this enriching journey. We hope that this issue of 'Hernia Today' will serve as a platform to look up to for researchers, clinicians and everyone interested in the field of hernia management. In closing, I believe we can continue to advance the field of hernia surgery and improve outcomes for countless individuals

Warm regards,

Dr. Ashish Dey

Editorial Secretary, Hernia Today,

The official Newsletter of the Hernia Society of India.



EVENT REPORTS

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HSICON, INDORE

HSICON 2024 was organized in the beautiful city of Indore, from 26th to 28th September 2024. This prestigious event brought together leading experts in hernia surgery from across India and around the world for an exchange of ideas, knowledge, and innovation. This conference featured a comprehensive scientific program, hands-on workshops, live surgery demonstrations. It was a great academic extravaganza where international and national experts were present and attended by delegates from all across the country. It was organized by Dr Ashutosh Soni as Chairman and Dr Sudesh Sharda, Dr Ishant Chaurasia and Dr Priyank Chelawat as Organising Secretaries. The official newsletter of Hernia Society of India, 'Hernia Today' was also released in print in the conference.

Also at the HSICON 2024, there was a Pre-Conference Workshop on September 26 at the IRCAD India Centre, Aurobindo, Indore. This featured hands-on cadaver training with expert instructors. The IRCAD India Centre is a state-of-the-art facility dedicated to advancing surgical techniques and education, offering an exceptional environment for immersive learning with cutting-edge technology and resources. Dr Mahak Bhandari was the organizing Co-chairman for this course.



CME ON RECENT ADVANCES IN HERNIA SURGERY, REWA

This CME was organized in association with HSI At Shyam Shah Government Medical College and associated Sanjay Gandhi Memorial Hospital, Rewa MP on 19th and 20th October 2024. It was a well attended course and appreciated by all the attending delegates.



HERNIOSPHERE TRAINING COURSE, BANGALORE

The Laparoscopic Hernia Surgery Training course was organized on Oct 19th and 20th 2024, at Kauveri hospital based on the Theme : ‘Herniosphere: Hiatal Hacks to Coopers Tacks’. Herniosphere Institute of Training is the brain child of Dr. Ganesh K Shenoy and his team comprising of Dr. Marina Thomas and Dr. Amol.S.Jeur. Under this banner they conduct various training courses in the field of laparoscopic and robotic hernia surgery. This has been attended by delegates from all parts of the country and abroad. All the training programs are endorsed by Hernia Society of India. In recognition of the work done in the field of herniology and abdominal wall reconstruction and training, Kauvery hospital, Electronic city has been accredited as “Centre of Excellence in Hernia Surgery” by Hernia Society of India.

This training program was attended by over 75 surgeons from across our country, Kenya and Bangladesh. This meeting involved live operative demonstrations in the operation theatre and online lectures by international faculties. The live demonstrations in the OT included 14 cases in 2 day’s time and consisted of TEP, TAPP, eTEP mesh repair for inguinal, inguinoscrotal and recurrent inguinal hernia, eTEP RS, eTEP TAR for large ventral and incisional hernias and laparoscopic Nissens funduplications for Hiatus hernias. Dr Sujith Wijerathne from Srilanka, Dr Kiyotaka Immamura from Japan and Dr Emanuel Guerreiro from Portugal were the international faculties who delivered lectures on inguinal, ventral and hiatus hernias.

Dr Vijay Bhaskaran, Executive Director, Kauvery group of hospitals, Bangalore and Hosur was the chief guest for the meeting. All the delegates received a certificate of attendance, pen drive containing whole gamut of laparoscopic hernia surgeries and a OT cap of Herniosphere.

The program was very well appreciated by all the delegates.



LIVE WORKSHOP, KOLKATA

HSI East Zone had organised a single day live operative workshop in MR Bangur Hospital, Kolkata on Friday, November 22nd, 2024. There were 3 theaters and 60 candidates had physically attended in batches. The following procedures were demonstrated : Lichtentein hernioplasty by Desarda repair, Shouldice repair and GPRVS for bilateral hernia by Dr M L Saha; Open TAR plus repair for complex ventral hernia, Edinburgh repair for Subcostal hernia, eTEP RS repair for paraumbilical hernia with Divarication of recti by Dr S J Baig; TAPP for femoral Hernia Dr Sumanta De; eTEP RS for incisional hernia Dr Udipta Roy; eTEP repair for bilateral inguinal hernia Dr Sandip Ray; IPOM plus repair for paraumbilical hernia Dr Ramesh Agarwala; TARM repair for incisional hernia with fascial traction by Dr Pallavi Priya. 12 cases were demonstrated across 4 OTs.

All delegates agreed that they could witness wide variety of hernia surgery in one day. The evening discussion on complications by Dr Pallavi and Dr Sumanta De was also well appreciated.



SYMPOSIUM ON MITIGATING COMPLICATIONS, CHENNAI

Hernia Society of India, in collaboration with GEM Hospital, Tamil Nadu Chapter, and IAGES, organized yet another single theme academic Symposium on Modern Hernia Surgery - Mitigating Complications on December 6th & 7th 2024 at GEM Hospital, Perungudi, Chennai. This comprehensive 2 day national event featured expert lectures, interactive discussions, and live surgery demonstrations focusing on the latest advancements and techniques in hernia surgery.

The event encompassed the following key components. There were Live surgical demonstrations showcasing techniques such as TAPP, TARM, ETEP, SCOLA, and Open AWR with 4K display and transmission; Expert-led discussions on intraoperative decision-making, complication prevention, and complex case management; Sessions dedicated to radiology, recurrence, domain loss, and advanced techniques including Botox optimization and IPOM.

President HSI Dr. Vijay Borgaonkar, Secretary Dr. Sarfaraz Baig, and other prominent national faculty, including Dr. C. Palanivelu, Dr. Pinak Dasgupta, Dr. Sumeet Shah, Dr. Deepraj Bhandarkar, and others, participated in the event. The event garnered exceptional participation from over 100 candidates, contributing to its overall success. Dr Pinak Dasgupta from GEM Hospital Chennai organized the hugely successful meeting.



LIVE WORKSHOP, PATNA

Hernia Society of India in partnership with Ruban Hospital, Patna organized a Single day live operative workshop where laparoscopic and robotic hernia work was demonstrated. The packed session was deeply appreciated. It was organized by Dr Kumar Sonal, Advanced Lap and Robotic Surgeon.

A live hernia training program was conducted at Ruban Memorial Hospital, Patna by the Department of Advance Laparoscopic & Robotic Surgery on 20th December 2024; in association with Bard Healthcare Private Limited and endorsed by Hernia Society of India. Around 100 surgeons from different parts of Bihar attended the live operative workshop. It was an interactive event where the delegates had their queries in the field of herniology answered by Dr. Sarfaraz Baig, invited guest faculty for the event; alongwith Dr. Kumar Sonal.

The delegates were demonstrated TAPP, ETEP for inguinal hernia, IPOM Plus, ETEP-RS for ventral hernia, Open TAR-Plus for complex ventral hernia and Robotic TAPP for groin hernia – all in a single day. The day ended with an open session, where the delegates interacted with each other as well with the faculty over high tea.



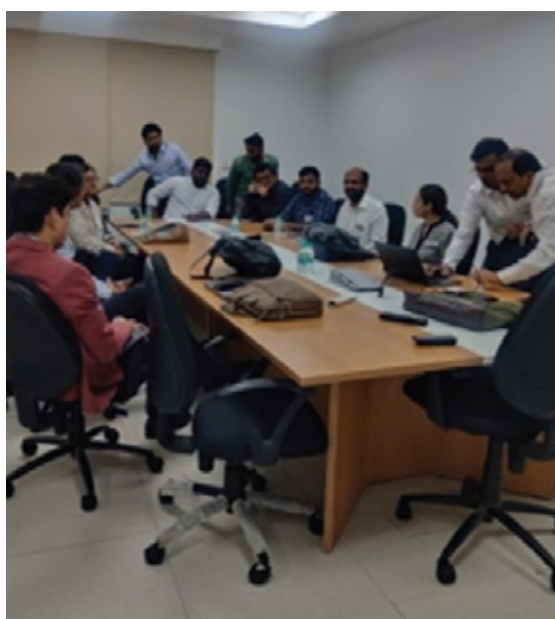
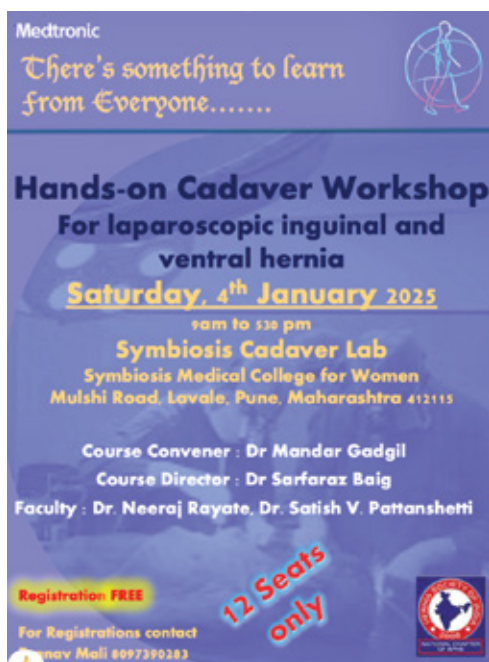
CADAVERIC WORKSHOP, PUNE

Hernia Society of India, in collaboration with Medtronic India has organised a one day hands on cadaveric hernia workshop on 4th January 2025 at the Symbiosis Medical College for women, Pune. It was organized by Mandar Gadgil, Pune.

Around 12 interested participants were ably guided by expert faculty namely Dr Sarfaraz Baig Secretary HSI, Dr. Mandar Gadgil (course director) EC member HSI, Dr. Neeraj Rayate, Dr. Satish Pattanshetti and Dr. Sudhir Jadhav from Pune.

The workshop consisted of didactic lecture and one to one discussion on technical pearls of hernia surgery followed by various procedures namely TEP, TAPP, ETEP RS and IPOM plus on cadavers being mentored by the faculty with personal attention.

The program garnered huge affirmative response and it happens to be a part of proposed similar activities planned in near future.



SURGICAL TRAINING EVENT, MOTIHARI

On 18th February 2025, Rahmania Medical Centre, Motihari, Bihar hosted a high-impact surgical training event titled “Hernia for All”, in collaboration with the Hernia Society of India. This specialized workshop, held under the leadership of Organising Chairman Dr. Tabrez Aziz and Organising Secretary Dr. Md Omar Tabrez, was designed as an exclusive training opportunity for a limited group of seven surgical candidates.

Interactive one on one training, with discussions on how to perform, the bail out procedures and others were discussed. Candidates came for training from different regions of Bihar in the OT in the workshop, following which lecture sessions covering the aspects of Hernia were organised. The hands-on training and case observations covered a broad spectrum of advanced hernia procedures, offering participants valuable exposure to techniques including TAPP, Open Inguinal hernia repair, IPOM Plus, eTEP, TARM, PCS, TAR, and the centre’s own Modified open inguinal technique. Each case was carefully selected to provide a comprehensive learning experience in both minimally invasive and open approaches to hernia repair.

Dr. Vijay Borgaonkar, Dr. Sumeet Shah, Dr. Sarfaraz Baig were among the main invited faculty endorsing this programme. Dr. Pallavi Priya also delivered a talk as guest faculty.

A special highlight of the program was the lecture by invited faculty Dr. Pallavi Priya, who delivered an insightful session on the management of groin hernias, emphasizing anatomical intricacies, technique selection, and evidence-based outcomes.

“Hernia for All” successfully brought together innovation, expertise, and practical skill-building, reinforcing Rahmania Medical Centre’s growing reputation as a hub for high-quality surgical training in Bihar.



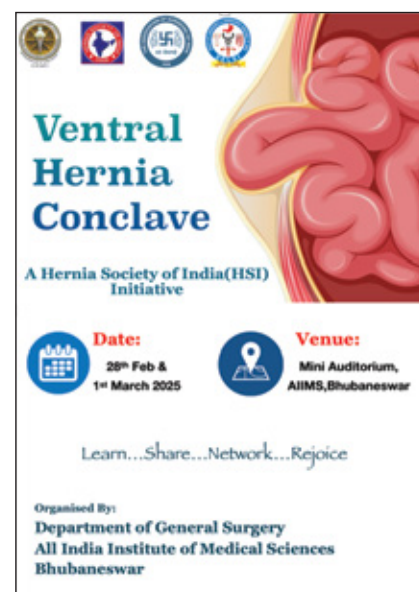
VENTRAL HERNIA CONCLAVE, BHUBANESWAR

The Department of General Surgery at AIIMS Bhubaneswar, under the leadership of Professor and Head Dr. Tushar Subhadarshan Mishra closely assisted by all the faculty members and residents successfully hosted The Ventral Hernia Conclave- an initiative of the Hernia Society of India, from February 28 to March 1, 2025. This two-day event brought together leading experts, surgeons, and medical professionals to discuss advancements and best practices in ventral hernia management.

The presence of the President of HSI Dr. Vijay Borgaonkar as Chief Guest and the Secretary Dr. Sarfaraz Baig as Guest of Honour, along with many EC members and some very active HSI stalwarts including Dr Magan Mehrothra, Dr. Mandar Gadgil, Dr. Erbaz Momin, Dr. Suprashant, Dr. Sanjay Sonar, Dr. Kumar Sonal and Dr. Priyanka made the show all the more glamorous. ASI Odisha head Dr. Prasana Kar and secretary Dr. Sudhanshu Mishra, OUHS head Dr. Manash Ranjan Sahoo and eminent surgeons from Odisha and all over India had graced the conference by their presence. Heads and Senior faculty members of seven AIIMS and 130 delegates from 9 states brought the flavour of mini National Conference.

The conclave featured a series of live surgical workshops, continuing medical education (CME) sessions, and panel discussions. One of the key highlights was a live surgery demonstrating the Fasciotens procedure, a first-of-its-kind in Odisha. These sessions provided participants with hands-on experience and in-depth knowledge of the latest techniques and innovations in hernia repair. The event served as a platform for promoting innovation in the medical field, fostering collaboration among professionals, and enhancing patient care.

Besides academics there was ample opportunity of networking, camaraderie and enjoying the culture, temple and the seashore of Odisha. Overall, the Ventral Hernia Conclave at AIIMS Bhubaneswar marked a significant milestone in the ongoing efforts of HSI to propagate knowledge among surgeons of the country. AIIMS Bhubaneswar showed promise and character for hosting bigger conferences in the future.



HERNIA SURGERY TRAINING COURSE, BANGALORE

The **Hernia Surgery Training course** was organized on March 22nd to 23rd 2025 in Kauvery Hospital, Bangalore based on the theme: Laparoscopy for All ,Robotics to Some! This training program in laparoscopic and robotic hernia surgery was attended by 152 surgeons across the country. This training program involved live operative demonstrations in the operation theatre, hands on training on specially designed modules on endotrainer and lectures by renowned faculties. Dr Vijay Borgoankar President , Dr Sumeet Shah Treasurer and Dr Mandar Gadgil, EC member West zone, Hernia Society of India were the faculties for this training course.

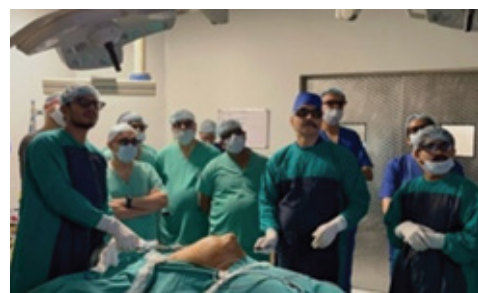
The operative workshop included 18 Live operative demonstrations of Basic, advanced, Complex and Robotic hernia surgeries. Live Operative sessions were moderated by Senior laparoscopic surgeons of Bangalore Dr. B.S. Ramesh, Dr. Arun Kumar, Dr. Srikantaih, Dr. Srikanth Kulkarni, Dr. Kalaivani, Dr. Sreekar Pai , Dr. Ravi Kumar, Dr. Bharath, Dr. Niranjana and Dr. Nawab Jan who were invited as local faculties. Dr. Vijay Bhaskaran, Executive Director , Kauvery group of hospitals, Bangalore and Hosur was the chief guest and Dr. Vijay Borgoankar, President Hernia Society of India was the guest of honour for the meeting. All the delegates received a certificate of attendance, pen drive containing whole gamut of laparoscopic hernia surgeries and a OT cap of Herniosphere.



ADVANCED HERNIA REPAIR WORKSHOP, MORADABAD

On 12th & 13th April 2025, Apex Hospital, Moradabad hosted a highly successful Advanced Hernia Repair Workshop, led by Dr. Magan Mehrotra, expert in robotic and laparoscopic bariatric and GI surgery. Dr. Mandar Gadgil had also participated as a national Faculty in the workshop. The workshop saw the participation of more than 90 surgeons from across the region, who received hands-on training in cutting-edge robotic and laparoscopic hernia repair techniques.

The event garnered exceptional feedback, highlighting the growing interest and demand for advanced surgical skill-building in minimally invasive procedures. The Focus in the workshop was on Robotic & Laparoscopic Hernia Repair



MIDTERM 2025, ALIGARH

The Department of Surgery, J N Medical College, Aligarh Aligarh Muslim University, under the aegis of Hernia Society of India organised the 'Midterm HSICon 2025- Seeking New Horizons', an update in Hernia surgery on 25th and 26th of April 2025. A workshop showcasing difficult cases, relevant talks on pertinent issues and interactive sessions were organized. The organizing Chairperson was Dr. Atia Zaka-ur-Rab and the Organising Secretaries were Dr. Md Yusuf Afaque and Dr. Imad Ali.

President HSI Dr. Vijay Borgaonkar, Hon Secretary Dr. Sarfaraz Baig, Zonal Vice Presidents Dr. Vandana Soni and Dr. Ganesh K Shenoy and many Executive committee members were present in the conference. International faculty Dr. Barbora East Czech Republic, Dr. Aali Sheen UK and Dr. Ritu Khare UAE also gave their talks online. The Vice Chancellor AMU Prof Naima Khatoon honoured the inaugural function.

Around forty faculty members from all over the country presented their work. Many newer procedures were demonstrated in the live operative workshop. There was also an EC meeting of HSI in the conference which discussed the plans and preparations of the upcoming APHS meet in September 2025.



FELLOWSHIP OF ADVANCED LAPAROSCOPIC SURGERY, KOLKATA

A unique FALS (Fellowship of Advanced Laparoscopic Surgery) hernia course was conducted in Kolkata from 8-10 August in Belle Vue Clinic.

There were 2 days of didactic lectures and a third day of operative workshop.

The lectures were made interactive, practical and incorporated some newer presentations on evolving understanding of abdominal wall anatomy, case based discussions and videos decoding procedures into stepwise understanding.

The evenings were made entertaining with singing and dancing.

The galaxy of national faculties - Deepraj Bhandarkar, Makhan Lal Saha, Satish Midha, Ramesh Punjani, Sumeet Shah, Sanjay Sonar, Mandar Gadgil, Ganesh Shenoy, Tarun Mittal, Nidhi Khandelwal, Pallawi Priya, Sumanta Dey- ensured a lively and pleasant academic atmosphere on all 3 days.

The live operative workshop displayed a wide array of procedures- TAPP, TEP, IPOM, eTEP, TARM, TAR- and sensitised the delegates with the entire MAS spectrum.

With delegates from all across India and abroad to as far as Oman, the program received great feedbacks. But this one stood out and touched our hearts-

“Gem Of a Course”

Never ever seen or being to such insightful learning atmosphere .

I feel like having a superman Cape to my scrubs while doing hernia next time

Nothing was rushed.

Every lecture and cases discussed has been meticulously dissected and presented.

I came all the way from Muscat to attend this FALS Hernia but its totally worth it.

Shukhran - Jazakallah Khair..

I could meet and greet the Stalwarts in real , after attending this course i understood .. why they are so .. !!

Thank you - All the faculty members and organising committee.”

I think this says it all.





WEBINARS

TECHNICAL TIPS FROM THE TITANS

HSI TITAN SERIES

The HSI TITAN Series The 'Technical Tips from the Titans' series, is our Webinar series with international experts!

Third session

Theme: Choosing the Optimum Mesh

Date: 19th October 2024

Speaker: Dr. Sean Orenstein

Organized by  Streaming Partner  Knowledge Partner 

Hernia Society of India Presents

Technical Tips from the Titans- Season 2

Session 3 Choosing the Optimum Mesh

Saturday, 19th Oct 2024
IST 19:00 - 20:00
EST 09:30 - 10:30

Speaker
Dr. Sean Orenstein
MD, FACS
Director - Hernia & Abdominal Wall Center
Associate Professor of Surgery
Oregon Health & Science University,
Portland, Oregon, USA

Moderators

- Dr. Vikas Singhal
MD, FRCR, FRCS(Ed), FRCS(G), FRCS(Sp)
Associate Surgeon, Medtronic Hospital
Bengaluru, India
- Dr. Ashish Bery
MD, FRCR, FRCS(Ed), FRCS(G), FRCS(Sp)
Associate Surgeon, Medtronic Hospital
Bengaluru, India

Convenors

- Dr. Vijay Borgaonkar
President
Hernia Society of India
- Dr. Sumesh Shah
Vice President
Hernia Society of India




bit.ly/HSITrans_Session3

Fourth session

Theme: PeTEP – The Extended Pre-Peritoneal
Repair for Ventral Hernia

Date: 26 July 2025

Speaker: Dr. Hector Ali Valenzuela Alpuche

Organized by  Knowledge Partner 

HERNIA SOCIETY OF INDIA Presents

PeTEP - The extended pre-peritoneal repair for Ventral Hernia - Technical Tips from Titans -

26 July 2025 IST 19:00 - 20:00 | EST 09:30 - 10:30

SPEAKER

Dr. Hector Ali Valenzuela Alpuche
Guatemala, Mexico


- Chief of abdominal wall surgery
Hospital Angeles
- Director of the IIRAD (International
Institution for Reconstruction and Abdominal
Wall Surgery) Latin America

MODERATORS

- Dr. Sarfaraz Baig
Secretary
Hernia Society of India
- Dr. Ashwin Thangavelu
Laparoscopic Surgeon
Ashwin Hospital

CONVENORS

- Dr. Vijay Borgaonkar
President
Hernia Society of India
- Dr. Sumesh Shah
Treasurer
Hernia Society of India

 www.herniasocietyofindia.org

WHAT'S IN THE CASE SERIES

In this episode of the 'What's in the case', there was a topic so rare that there are only two speakers! This 'one of its kind' program in the WITC series was organized online on January 4 2025, 5 PM IST. It was LIVE on the HSI Facebook page. It was on a very interesting topic- 'Hernias after excision of abdominal wall tumors'



Hernia society of India brought another interesting debate on the topic in its WITC series, Obesity and Hernia : The chicken and egg paradox on Facebook live HSI page on 1st March at 5 pm. It was very well attended and appreciated.

The next What's in the case series was organized on 5th April on another interesting and keenly followed topic. As surgeons we do come across some really interesting cases of hernia surgery and their complications, and a few of them quite extraordinary. Surgeons who had encountered and dealt with their management had talked on the topic. Because at HSI, we feel the community must know and learn from those videos before they encounter those complications themselves. The topic this time was "The Flipside - Complications you least expect in hernia surgeries"





ACHIEVEMENTS OF HSI MEMBERS

ROBOTIC TELESURGERY ON SSI MANTRA BY DR. MAGAN MEHROTRA AND DR. MAHAK BHANDARI

Telesurgery - the word sparks a twinkle in every surgeon's eyes but with it come the obvious apprehensions. I could not sleep well, the night before we had scheduled a telesurgery from SSI Mantra headquarters to Moradabad (200 km away). As I was on my way to the SSI office next morning, there were several constant questions in my mind, a number of "what if"s!! So the first thing we did was to set up a dummy abdomen and perform basic functions like pick and place to understand the level of lag in telesurgery. To my surprise there was no perceivable lag. We could communicate with our OT seamlessly and we decided to get on with the "real thing" after just 5 minutes of practice. The first procedure went off so well that we decided to do the second one also in a go as other OT preps were in place. We had a competent team of surgeons and technicians in Apex Hospital, Moradabad, ready to take over in case of any problem.

The technology utilises a dedicated Internet line from point to point so that there is no disruption of signals at any time during the procedure. The data packets coming from the patient side are pretty small but those going from the surgeon's console to the patient side are pretty large and therefore with today's network speeds it is not possible to be sure of reliable data transfer without a dedicated line. However, in times to come this procedure will become simpler through satellite transmissions or otherwise and with improved data compression for effective transfer.

Although at this point this technology and milestone may appear "far fetched" to some the impacts of this successful endeavour are far reaching. It will have a role in teleproctoring to start with and will help the best of care reaching the remotest of patients. The idea is being extrapolated to make a telesurgery bus with the a recovery room for remote patients to get access while the surgeon operates from his "office"!!-

Dr. Magan Mehrotra, Apex Hospital, Moradabad

I coincidentally also did 2 tele surgeries on the same day with SSI MANTRA 3.0 from our IRCAD TRAINING CENTRE to our Hospital's OT. One Hernia & One Gastric Bypass. This definitely opens new possibilities for future. I was definitely a little slow, as I am a Da Vinci user & have started SSI Mantra just now. But now IRCAD INDIA LAB has the SSI MANTRA 3.0 for all the surgeons for training also.- **Dr. Mahak Bhandari**, Mohak Hospital, Indore.





TRAVELLING FELLOWSHIP

TRAVELLING FELLOWSHIP

The Hernia Society of India has awarded Dr. Md. Yusuf Afaque, AMU, Aligarh, an international travel fellowship for 2024-2025. To advance his expertise, he completed his fellowship under the mentorship of Prof Garcia-Urena, Madrid, Spain, for two weeks. Prof Garcia-Urena is an authority in the field of hernia surgery.

This recognition highlights Dr. Yusuf's dedication and significant contributions to the field of hernia surgery. He has made remarkable strides in the surgical management of hernias, focusing on innovative techniques that enhance patient outcomes. The European Fellowship provided him with the opportunity to collaborate with leading experts and gain exposure to cutting-edge advancements.



Dr. Shivanshu Mishra from Shivani Hospital, Kanpur also got the HSI international travel fellowship of 2 lakhs in Young HSIcon 2024, 28-30 March, New Delhi, sponsored by Medtronic. He completed the Fellowship of 2 weeks in St Mark's Hospital, UK under the mentorship of Dr. Akash Mehta who specialises in Colorectal and Abdominal wall reconstruction.



UPCOMING EVENT

UPCOMING EVENT – APHS-HSICON 2025

WELCOME ADDRESS BY CONGRESS SECRETARIAT

Dear Colleague,

We are honored and delighted to invite you to the joint 20th Annual Congress of the Asia Pacific Hernia Society (APHS) and 19th Hernia Society of India (HSI), to be held in Delhi, India, from 18th to 20th September 2025.

Asia Pacific hernia Society was established in 2004 in Bali, Indonesia with like-minded hernia enthusiasts. We have witnessed firsthand the society's evolution from a small group of dedicated individuals to a thriving international community of hernia surgeons. The evolution has been both in terms of the number of members and the quality of the activities conducted over the years. The avowed objective of this homogeneous society, APHS, was to advance the art and science of hernia surgery by adopting best contemporary hernia practices. APHS has been instrumental in advancing the field of herniology through education, research, and collaboration. We have organized numerous congresses, workshops, and training programs, providing a platform for knowledge sharing and skill development.

The upcoming APHS 2025 congress will be a testament to our society's growth and impact. The scientific committee and the organizing committee are diligently curating a comprehensive scientific program. Renowned experts from around the world will share their latest research, clinical experiences, and surgical techniques. The Pre-congress Workshops will offer in-depth training and hands-on experience for participants.

As we gather to share our collective experiences and expertise, we aim to not only advance the field of hernia surgery but also strengthen bonds of camaraderie and collaboration that transcend geographical boundaries.

Delhi can serve as a base for friends wanting to explore other regions of India. Delhi is well connected by air, train and road to most tourist destinations. It would be ideal to plan for a holiday too to witness your favorite getaways be it the beach, the mountains or forts and palaces.

Team HSI

We are confident that this congress will be an unforgettable experience, providing you with valuable insights, networking opportunities, and inspiration. We look forward to welcoming you to Delhi and celebrating the achievements of APHS together.

For more information and to register, please visit our website: www.aphs2025.com

Sincerely,

Dr. Manish Baijal

APHS 2025
20th Annual Congress of the
Asia Pacific Hernia Society (APHS) &
19th Annual Congress of the
Hernia Society of India (HSI)

**18, 19, 20
SEPTEMBER**

JW MARRIOTT HOTEL,
AEROCITY,
NEW DELHI, INDIA

**APHS 2025 – Bringing Global Hernia Experts Together to
Collaborate, Innovate & Integrate.**

MEET OUR EXPERT FACULTY

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 Prof. Davide Lomanto Singapore	 Dr. Gafoor Mubarak Malaysia	 Dr. George Yang China	 Dr. Jose Macario Faylena Philippines
 Dr. Le Quan Anh Tuan Vietnam	 Prof. Naomichi Ueno Japan	 Dr. Rakesh Gupta Nepal	 Prof. Sujith Wijerathne Sri Lanka
 Prof. Sung Il Choi Korea	 Dr. Takehiro Machisuka Japan	 Prof. Takeyuki Misawa Japan	 Dr. Vimal Vasudevan Malaysia

For more details, visit: www.aphs2025.com
Email: aphs2025@gmail.com

Max Super Specialty Hospital, Saket
Mr Pankaj Gupta | M: +91-98116 90841

Conference Manager **Mr Saurabh Sharma**
M: +91-98717 99136



APHS 2025
20th Annual Congress of the
Asia Pacific Hernia Society (APHS) &
19th Annual Congress of the
Hernia Society of India (HSI)

**18, 19, 20
SEPTEMBER**

JW MARRIOTT HOTEL,
AEROCITY,
NEW DELHI, INDIA

Collaborate, Innovate, Integrate

MEET OUR EXPERT FACULTY

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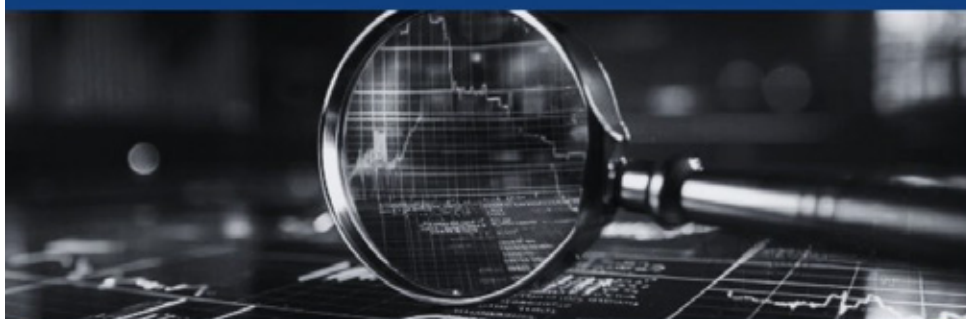


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Hernia through the Lens



APHS-HSICON 2025

Sept 18-20, 2025



J W Marriott, Aerocity, New Delhi

NO TRENDS NOISE JUST SCIENCE



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INVITED ARTICLES

INVITED ARTICLES

TITLE: USE OF BOTULINUM TOXIN IN COMPLEX ABDOMINAL WALL HERNIA FOR INDICATIONS OTHER THAN LOSS OF DOMAIN

Dr. Erbaz Riyaz Momin

MBBS; MS; DNB; FRCSEd

Professor, Department of Surgery

HBT Medical College & Dr RN Cooper Hospital, Mumbai

Abstract: Background: Botulinum Toxin A (BTA) induces reversible flaccid paralysis of skeletal muscles by inhibiting acetylcholine release at neuromuscular junctions. This leads to lengthening of the lateral abdominal wall muscles and improved compliance. While its application in ventral hernias with Loss of Domain (LoD) is well established, its role in other complex abdominal wall hernias (CAWH) remains underreported.

Methods: This case series includes three patients with challenging hernias: a morbidly obese woman with primary umbilical hernia and W3 rectus diastasis, a man with an incisional hernia complicated by subacute intestinal obstruction (SAIO), and a woman with significant tissue loss following prior laparotomy for peritonitis. All patients received 200 units of BTA administered six weeks prior to surgery. Each patient underwent structured prehabilitation aimed at optimizing surgical readiness and overall functional capacity.

Results: BTA use improved abdominal wall compliance in all cases, allowing tension-free closure. All patients remained recurrence-free at follow-up upto 3 years.

Conclusion: Preoperative BTA is a promising adjunct in CAWH management in indications beyond LoD, supporting safer and more effective surgical repair. Larger studies are warranted.

Keywords: Botulinum Toxin, Complex Abdominal Wall Hernia, TAR, Rives Stoppa, Prehabilitation.

Introduction:- Botulinum toxin A (BTA) is a neurotoxin that blocks cholinergic nerve terminals by inhibiting the release of acetylcholine, leading to reversible flaccid muscular paralysis and resulting in the lengthening of muscle fibres [1]. This unique property has been well documented to facilitate midline approximation, particularly in cases of ventral hernia (VH) associated with Loss of Domain (LoD) [1,2].

Given its ability to improve abdominal wall compliance, BTA may also have potential applications in various Complex Abdominal Wall Hernias (CAWH) beyond the LoD subset.

In this case series, we report our experience with the use of BTA to facilitate surgical closure and repair of CAWH apart from LoD. All patients received 200 units of BTA six weeks preoperatively, administered using the technique described by Ibarra-Hurtado et al. [2]. Preoperative optimisation with dietary modifications and chest physiotherapy was undertaken in all cases prior to surgery.

Table 1: Summary of Cases Using Botulinum Toxin A (BTA) in Complex Abdominal Wall Hernias

Case	Patient Details	Hernia Classification (EHS)	Clinical Challenge	Surgical Procedure	Outcome
1	52-year-old female, BMI 40.2 kg/m ²	Medium sized (2.5cm) primary Umbilical Hernia with W3 (13.5cm) Rectus Diastasis	Obesity, large hernia, divarication of recti	Open Rives-Stoppa repair with retro-muscular mesh; fleur-de-lis skin excision	Asymptomatic at 3 years and 2 months
2	45-year-old male	M2-4 W3 (14cm) incisional hernia	Subacute intestinal obstruction, prior mesh infection, malnutrition	Open bilateral TAR with retro-muscular meshplasty (homeplate) configuration)	Asymptomatic at 2 years and 10 months
3	48-year-old female	M1-M5 W3 (12.9cm) incisional hernia with muscle tissue loss	Severe muscle tissue loss after previous laparotomy for peritonitis	Open bilateral TAR with peritoneal flaps and retro-muscular meshplasty	Asymptomatic at 2 years and 7 months

Case 1- A 52-year-old female with a BMI of 40.2 kg/m² presented with painful primary umbilical omentocoele 2.5 cm defect associated with a W3 (13.5 cm) rectus diastasis (RD). History of four previous caesareans through Pfannenstiel incision. The patient was counselled regarding both obesity and hernia management; however, she opted for hernia repair alone. Given the anticipated difficulty in achieving midline approximation due to her obesity and hernia with associated large RD, an open retro-muscular mesh repair with planned Transversus Abdominis Release (TAR) with panniculectomy was considered. Preoperative optimisation was initiated six weeks prior with dietary modifications, respiratory exercises, and Botulinum Toxin A (BTA) infiltration (Figure 1).

Intra-operatively, the abdominal wall demonstrated sufficient compliance to allow tension-free midline closure using the Rives-Stoppa technique, thereby obviating the need for TAR. A polypropylene mesh, trimmed to 20cm x 36cm, was placed in the retro-muscular plane extending from the xiphisternum to the retropubic space. Additionally, a fleur-de-lis incision facilitated panniculectomy improving cosmesis. The patient remains asymptomatic beyond 3 years of follow-up.

Case 2- A 45-year-old male presented with a M2-4 W3 (14cm) irreducible incisional hernia complicated by subacute intestinal obstruction (SAIO) [Figure 2 (2a)]. Three years earlier, at another center, he had undergone an onlay meshplasty for a primary small umbilical hernia. Postoperatively he developed sepsis due to unrecognised iatrogenic small bowel perforation necessitating a midline exploratory laparotomy with resection anastomosis, mesh explantation, and primary fascial closure. A recurrence was noted six months later when he developed Sub Acute Intestinal Obstruction (SAIO).

The patient, apprehensive after previous complications, delayed seeking treatment until malnutrition and weight loss ensued. CT imaging revealed a M2-4 W3 hernia with a defect measuring 22cm craniocaudally and 14cm transversely [Figure 2 (2b)]. Botulinum Toxin A (BTA) was administered to facilitate abdominal wall compliance. Within 24 hours, the patient's pain, discomfort and obstructive symptoms improved remarkably, enabling nutritional and respiratory prehabilitation [Figure 2 (2c)].

Six weeks later, an open bilateral Transversus Abdominis Release (TAR) with retro-muscular meshplasty was performed [Figure 2 (2d)]. Tension-free posterior rectus sheath (PRS) approximation was achieved [Figure 2 (2e)]. Two polypropylene meshes (26cm x 36cm and 30cm x 30cm) were placed in a home-plate configuration [Figure 2 (2f)], extending from the xiphisternum to the space of Retzius and laterally up to the Psoas muscles. At 10 months follow-up, the patient remained asymptomatic with no evidence of recurrence [Figure 2 (2g and 2h)]. Patient is recurrence free with good QoL at almost 3 years post procedure.

Case 3- A 48-year-old female presented with a five year history of reducible incisional ventral hernia starting in midline extending into the right lower quadrant [Figure 3 (3a)]. Six years earlier, she underwent small bowel resection for perforation through a midline laparotomy complicated with wound issues. CT scan confirmed M1-M5 W3 incisional hernia. In right lower quadrant, there was large muscle tissue loss of 12.9cm transversely [(Figure 3 (3b))].

To enable tension-free closure, Botulinum Toxin A (BTA) infiltration was performed, and prehabilitation initiated six weeks prior to surgery [Figure 3 (3c)]. Subsequently, an open bilateral Transversus Abdominis Release (TAR) with peritoneal flaps and retromuscular meshplasty was carried out. Two polypropylene meshes (26cm x 36cm each) were placed in a home-plate configuration, extending from the xiphisternum to the space of Retzius and laterally up to each Psoas muscles.

At three months the patient was reassessed [Figure 3(3.f)]. Now its 2.7 years post procedure patient remains recurrence free with good QoL.

Discussion: Complex abdominal wall hernias (CAWH) represents a significant surgical challenge due to factors such as large defect sizes, loss of fascial planes, scarring, prior surgeries, bowel adhesions, obesity, and associated comorbidities like diabetes mellitus. Upto 30% patients may develop an incisional hernia following abdominal surgeries which may rise up to 35% after emergency laparotomies [1-3]. Despite advances in surgical techniques, including the use of meshes and component separation methods, the high recurrence rate remains a major concern [4].

Loss of domain (LoD) is a critical condition wherein a substantial portion of abdominal contents remains outside the abdominal cavity. It is typically diagnosed when the hernia sac volume to abdominal cavity volume ratio exceeds 25%, as per Tanaka's and Sabbagh's indices [5,6]. In such scenarios, closing the abdominal defect can lead to intra-abdominal hypertension and compartment syndrome. Botulinum toxin A (BTA), a neurotoxin that blocks acetylcholine release at neuromuscular junctions resulting in reversible flaccid paralysis, has been effectively used to improve abdominal wall compliance in LoD cases [7].

We believe, the unique property of BTA to cause muscle relaxation and lengthening has opened the possibility of its utility in CAWH beyond LoD. In our case series, BTA was used as an adjunct to surgical planning and optimisation of patients presenting with challenges such as obesity with large RD, SAIO, and severe tissue loss, rather than classic LoD alone.

In the first case, the patient had a symptomatic primary ventral hernia with significant rectus diastasis (W3) and morbid obesity (BMI 40.2 kg/m²). Achieving a tension-free midline closure was anticipated to be difficult even with Transversus Abdominis Release (TAR). However, prehabilitation with BTA infiltration, improved abdominal wall compliance enabling a tension-free Rives-Stoppa repair obviating the need for TAR or bridging while preserving the integrity of the abdominal wall.

The second case involved a patient with an irreducible incisional hernia complicated by SAIO. Here, BTA infiltration not only facilitated relaxation of the abdominal wall muscles but also led to symptomatic relief of the Sub Acute Intestinal Obstruction within 24 hours, allowing nutritional and respiratory optimisation. This window of opportunity prevented the need for emergency surgery and the patient was managed electively with good outcomes.

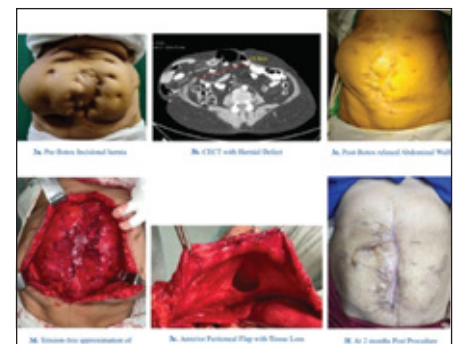
In the third case, a patient with a history of laparotomy complicated by severe wound sepsis presented with a large incisional hernia with tissue loss. Such a case usually would need a bridging repair which may provide less than optimum outcomes. In this case BTA administration enhanced abdominal wall compliance, allowing for a bilateral TAR with peritoneal flaps and retromuscular mesh placement to cover the large defect with satisfying outcome.

Previous studies, including those by Timmer AS et al. [1], Ibarra-Hurtado et al. [2] and Faisal Farooque et al. [7], have demonstrated that BTA infiltration can lead to an average unstretched muscle length gain of upto 3.2cm per side with improved fascial closure rates. We believe in our cases, these properties of BTA aided in midline approximation, while reducing tension, and in one of our case obviated the need for TAR.

BTA has the potential to offer non invasive adjunct in indications other than LoD. In our experience with large defect sizes, SAIO or tissue loss, BTA not only provided mechanical advantages of enhancing abdominal wall compliance but also functional benefits by buying time for preoperative patient optimisation facilitating better surgical outcomes.

However, it is important to acknowledge the limitations of our study, including the small sample size. Larger prospective studies with standardised protocols are required to better define the role of BTA across the diverse spectrum of CAWH.

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PREOPERATIVE OPTIMIZATION IN ABDOMINAL WALL REPAIR

Dr. Ishant Chourasia

Professor & Head of Department, Department of General surgery
Sunder Lal Patwa Government Medical College, Mandsaur, MADHYA Pradesh, India

Abstract: Background: Abdominal wall hernia repair is a frequently encountered yet technically demanding procedure, particularly in peripheral or resource-limited healthcare settings. The outcomes of such repairs are significantly influenced by modifiable patient-related risk factors. Despite growing evidence supporting the importance of



reoperative optimization, its consistent implementation in peripheral centers remains limited due to gaps in awareness, infrastructure, and coordinated care. This study evaluates the role and impact of structured preoperative optimization strategies in improving surgical outcomes in patients undergoing abdominal wall repair in a peripheral healthcare setup. Methods: An observational study was conducted at a peripheral tertiary care center to assess the effectiveness of preoperative optimization in patients scheduled for ventral hernia repair. Key optimization domains included management of obesity, glycemic control, smoking cessation, nutritional assessment, and infection prevention. Standardized preoperative protocols such as ASA physical status classification and HbA1c measurement were employed. Patients were stratified using ventral hernia risk scoring systems, and high-risk individuals were counseled and optimized through multidisciplinary collaboration involving surgeons, anesthesiologists, dietitians, and if necessary, bariatric specialists. Surgical planning included consideration of techniques like progressive pneumoperitoneum and staged reconstruction. Results: A total of 88% of patients had documented ASA grades, and 82% underwent HbA1c screening. High levels of professional consensus (>80%) were observed regarding the necessity of evaluating prior abdominal surgeries, mesh-related complications, comorbidities such as diabetes and ischemic heart disease, and use of immunosuppressants or anticoagulants. Weight reduction strategies, smoking cessation (initiated at least 30 days preoperatively), and optimization of nutritional status were implemented where appropriate. The structured optimization pathway resulted in a measurable decline in postoperative complications, including surgical site infections (SSI) and surgical site occurrences (SSO), especially in patients with previously elevated risk scores. Conclusion: Preoperative optimization plays a pivotal role in enhancing the safety and success of abdominal wall hernia repairs, particularly in peripheral healthcare environments where postoperative complications can have profound consequences. Despite infrastructural constraints, applying evidence-based protocols and leveraging a multidisciplinary care model can significantly improve perioperative outcomes. This study highlights that adherence to structured optimization pathways-including weight management, glycemic control, smoking cessation, and infection risk mitigation-not only reduces complications but also standardizes care in low-resource settings. Bridging the gap between central and peripheral surgical care delivery requires a shift towards proactive, risk-stratified, and patient-centered preoperative planning. Such efforts are essential for elevating the quality and safety of hernia repair globally.



LIFE BEYOND SURGERY

LIFE BEYOND SURGERY – THE SECOND SKIN

Dr. Brijesh Dube

Chief Surgeon,
Department of Bariatric, Metabolic and Hernia Surgery,
Thunga Hospitals, Malad, Juhu & Mira Road, Mumbai

They say the gown we wear in the operating room is like a second skin. It shields us, transforms us, and prepares us for the precision and pressure that define our surgical identity. But what happens when the last stitch is placed, the gloves come off, and the lights in the OR dim? What happens to the surgeon when the scalpel is set aside?

For most of my professional life, I lived in the comfort—and confinement—of that skin. I was my craft. I measured days in successful cases, weeks in academic milestones, and years in surgical volumes. I wore my fatigue like a badge of honour. But somewhere along the way, amid the life-saving procedures and applause in conferences, a quiet voice began to whisper: Is there more to you than this?

I remember a moment vividly. I was finishing a complex abdominal wall reconstruction late one evening. The case had gone well, technically perfect. Yet, as I sat in my office after, sipping lukewarm tea, I felt an odd emptiness. Not dissatisfaction—but disconnection. The surgeon had delivered. But the man inside the gown? He felt forgotten.

That was my turning point.

I began to question the very identity I had constructed so meticulously. The surgical world had taught me discipline, resilience, and the art of healing. But I had missed out on healing myself—mentally, physically, and emotionally.

That's when I began exploring my true second skin—not the gown I wore in the OR, but the one I had long abandoned: the runner, the reader, the mentor, the father, the friend. I picked up books I had shelved for years. I returned to the gym not to chase aesthetics, but to reclaim my energy. I started mentoring young surgeons—not just in operative techniques, but in navigating fear, failure, and purpose. I even began to write—words, not operative notes—about life, doubt, dreams.

It was liberating.

Surgery is a noble calling, but it is not our only identity. We must not let excellence in one arena cost us meaning in others. There's power in knowing that we are more than the titles we bear or the complications we avoid. That we are, in fact, allowed to be whole.

Today, I still love surgery. I still chase perfection. But I've come to realize that the greatest reconstructions are not always abdominal. Sometimes, they are internal—the stitching together of passion, purpose, and presence.

To every surgeon reading this: invest in your second skin. Nurture the parts of you that don't show up on a CV. Play that guitar. Reignite that hobby. Hug your children a little tighter. Laugh, even if it's past midnight after a 10-hour case. Because the life you build beyond surgery may just be the most profound operation you ever perform.

LIFE BEYOND SURGERY - FANTASY

Miss Anonymous

Some days I wonder if I was born in the wrong realm. Rather, the wrong universe.
I have been told I belong here - among knives & scalpels, flesh and fume, my words scream protocol and precision. I've been taught to control a cavitary chaos with science, logic and grit.
But is that all?

Because I never felt just this.

I feel other worlds.
Worlds I have never seen, but dream in my dreams.
Beasts running through snow-laced woods. Wands pulsating with magical beams. Wings unfurling from mountaintops.
Prophecies whispered in languages unknown.
A world, where faith blooms & peace rules.

I long not to escape this niche land, but to have one more.
Something that is described as fantasy, but maybe, just maybe, some version of it is real in some world?



This life... it feels too small sometimes. Too explainable. Too routine.
As if wonder must be traded for wisdom, as if the building blocks of life have already been laid and cannot be shaken.

But what if, there is a world made of what ifs?
What if I could live in a world where oaths are sacred, and honour is currency?
What if I didn't have to choose between saving others and saving myself?
What if love wasn't a chore, but the core?

I want to be seen, not as a title or a tool, but as a soul aching to matter beyond function.
To feel the waves of a different wind, to know friendship like fate.
I do not seek power; I seek a portal. To integrity, to fantasy, to strength. The ifs.

And yes, I know the world won't change.
But if there is even the tiniest tear in the fabric of this rusty reality, I'll find it. I'll slip through.
I'll fly!

LIFE BEYOND SURGERY - BETWEEN BREATH AND BUREAUCRACY

Dr. Pallawi Priya

Consultant, Minimal Access Surgery,
Belle Vue Clinic, Kolkata, India

She had been fighting battles long before I met her. HIV had weakened her. Tuberculosis had drained her. And now, COVID had come for whatever was left. But in the palliative care unit run by Doctors Without Borders in Patna, she was more than a patient in the final stretch. She was someone whose pain we understood, whose suffering we tried to ease, whose dignity we fought to preserve.

We kept her comfortable, as comfortable as someone in her condition could be. The team here didn't treat numbers, didn't measure survival in percentages. It was care, unfiltered. The kind that exists beyond statistics and protocols.

Then the call came.

Government officials didn't want a COVID death recorded at the facility. Optics mattered. This wasn't about her anymore—it was about how things would look. The order was clear: transfer her to a government hospital.

I knew what that meant. Everyone did. The government hospitals were overflowing—corridors packed with people gasping for breath, beds occupied by the lucky ones who had found oxygen. And yet, orders were orders.

We prepared the transfer. She had no family nearby, just us. And I, among the team that had cared for her, had somehow become her anchor. She held onto my wrist as we wheeled her out, her grip tighter than someone with her frail body should have been able to manage.



“Where are you taking me?” she asked, panic thick in her voice.

I tried to reassure her. Told her we were transferring her for continued care. But she knew. She had seen enough hospitals, heard enough conversations, lived through enough abandonment to know what was happening.

The ambulance rattled through the streets, navigating towards a place that had no room for her. When we arrived, reality settled in. There were no beds. No oxygen. No staff available to manage another critical patient.

The best I could do—the only thing possible—was to place her on a stretcher in the corridor.

She knew then.

Her thin fingers reached out for me, trembling, grasping at the edge of my sleeve. “Don’t leave me.” The words were not loud, but they tore through me in a way nothing else had before.

But I had to.

I had no authority to fix the system. No power to undo the bureaucracy that had placed her there. My hands, trained to heal, felt useless in that moment.

As I stepped away, she kept calling out to me. Her voice followed me, echoing down the corridor long after I could no longer turn back.



HSI & SOCIAL MEDIA PRESENCE

HSI AND THE SOCIAL MEDIA PRESENCE

Dr. Nidhi Khandelwal

Consultant Robotic and Laparoscopic GI and Bariatric
Jaslok Hospital, Mumbai

Hernia defects aren't the only thing we're suturing.
We're also stitching together a strong digital presence!

HSI actively maintains a presence on LinkedIn, Facebook and Instagram, where we have cultivated a community of surgeons, trainees, and even allied professionals.

We publish a variety of posts including:

- Event promotions - whether it's a conference or a webinar, all updates are announced here
- Video lectures and operative demonstrations - highlighting fine surgical techniques
- Engagement/educational reels – with the ultimate aim to teach & learn.

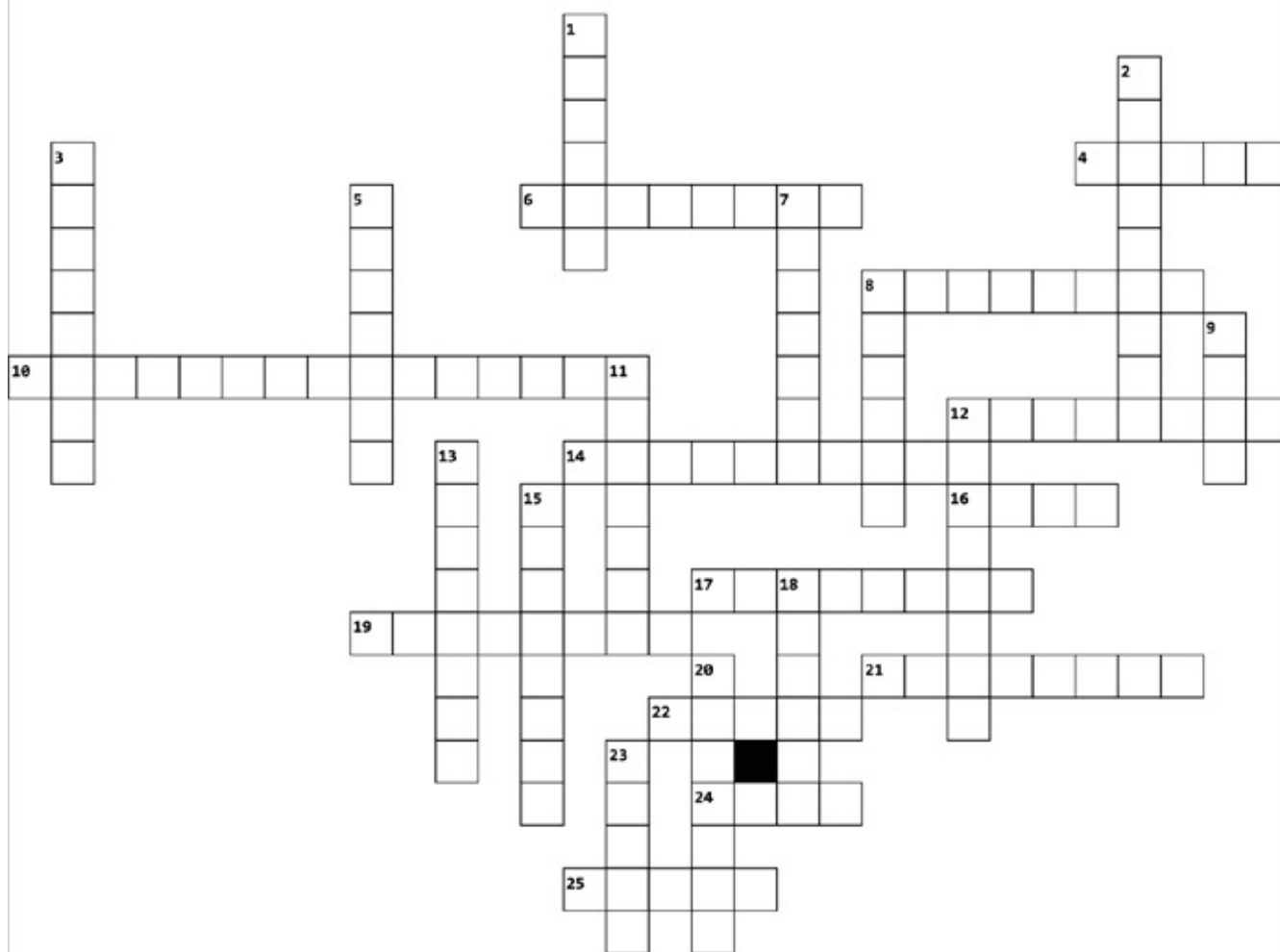
Most of our content is sourced from our Executive Committee members, zonal workshop leaders, and eager delegates. All submissions are reviewed by group admins before posting, ensuring alignment with our society's message and quality standards.

Looking ahead, we aim to ramp up live streamed case demonstrations, enhance post op Q&As with faculty, and expand our follower base with targeted campaigns ahead of major events like APHS 2025. Our strategic blend of education, engagement, and event outreach continues to reinforce the Hernia Society of India as a leading resource and network for hernia surgery professionals across the country.

WORLDWIDE SURVEY BY DENMARK HERNIA SOCIETY

The Denmark Hernia Society conducted a worldwide survey on surgeon practices for primary ventral hernia that was done with a lot of enthusiasm all across the country. This was in association with the Hernia Society of India. Enthusiastic participation was seen among all members to participate in this online survey. This would go the common database of information on mesh placements in Ventral hernia surgery.





Across

4. parastomal hernia technique, from Hershey, Pennsylvania, USA
6. from Columbia University, Defined the Concept of TAR
8. Robotic hernia surgeon from Brisbane, Australia
10. Founder President of AWRSC, Editor of Arcuate Lines, from Kolkata, India
12. dynamic robotic surgeon from Arizona, USA
14. from Coimbatore, India, 21k subscribers on his youtube channel
16. CoE in Hernia surgery from Bucharest, Romania
17. Pioneered TARM, from Gokak, Karnataka, India
19. Director of Carolina hernia Institute, USA
21. Chairman of Israel society of Hernia
22. from Sheeba Medical center, Israel, extremely active on social media
24. Clinical director of Lichtenstein Clinic, California
25. Director of Hernia Center, Cleveland clinic, USA

Down

1. AWR surgeon, popularly known as the Bangalore express from India
2. Lady GI and General surgeon from Penn State Health, Hershey
3. from Hamburg, pioneered MILOS and eMILOS
5. Lady surgeon from university of Cape town, runs marathons
7. President of Swiss working group in hernia surgery, from Zurich
8. popularised Reverse TAR from Madrid
9. Colombian surgeon who pioneered eTEP
11. Dynamic surgeon from Jeevanshree Hospital, Miraj , India
12. Dynamic hernia surgeon from Moscow
13. Robotic hernia surgeon, from Annapolis, USA
15. loves poetry, GI and Hernia surgeon, from Kolkata
18. President, AWR surgeons community, India
20. treasurer of AHS and Director of Abdominal Core health at NYU, New York
23. New York City surgeon and founder of IHC

*Answer key at the end of the newsletter.



HSI WEBSITE

HSI WEBSITE



herniasocietyofindia.org

'HERNIA TODAY' THE HSI NEWSLETTER COMMITTEE

- Dr Ashish Dey
- Dr Priyank Chelawat
- Dr Sumeet Shah
- Dr Sarfaraz Baig
- Dr Manish Baijal
- Dr Vijay Borgaonkar



HSI MEMBERSHIP

HSI MEMBERSHIP

The members of HSI are primarily surgeons from India and the Asian subcontinent. The members of HSI benefit by a) being a part of a growing, community of like-minded surgeons interested in hernia surgery – open or laparoscopic, b) having opportunities to interact and share knowledge with experts in the field and c) being able to attend various conferences, workshops, seminars and CMEs organised by HSI at a discounted rate. Those also opting for a membership of APHS will, in addition, be eligible to receive subscription to the journal *Hernia* (a worldwide renowned journal dedicated to herniology) at a discounted rate.

HSI has three types of members

1. Life member: Any surgeon from India holding a postgraduate surgical qualification [MS or DNB (Gen. Surgery)] can become a life member. He / she shall be proposed and seconded by two life members of HSI. The life membership fee currently is Rs 5000 + GST.
2. Associate member: A postgraduate student pursuing surgical training (MS or DNB (Gen. Surgery) can apply to become an associate member. He / she shall be proposed and seconded by two life members of HSI. The associate membership fee currently is Rs 2000 + GST. The associate member shall pay the difference between the life membership fee and the fee already paid after obtaining the postgraduate qualification and become a life member.
3. International member: A surgeon from outside India holding a postgraduate surgical qualification can become an international member. The international membership fee currently is US \$100.

For membership related queries please contact:

HSI manager

M: 9830008846

**HSI MEMBERSHIP IS ALSO NOW AVAILABLE ONLINE ON
herniasocietyofindia.org**

**HSI Membership is now available to Surgical Post
Graduates and International Surgeons.**



HSI CENTRES OF EXCELLENCE

HSI CENTRES OF EXCELLENCE

Center of Excellence	Max Institute of Minimal Access, Metabolic & Bariatric Surgery, Max Hospital, Saket, New Delhi
In charge	Dr. Pradeep Chowbey
Team members	Dr Rajesh Khullar Dr Anil Sharma Dr Vandana Soni Dr Manish Baijal
Contact person	Mr. Pankaj Gupta E: pankaj.gupta1@maxhealthcare.com M: +919811690841

Center of Excellence	Department of Minimal Access and Bariatric Surgery, A. V. Hospital, Bangalore
In charge	Dr. M. Ramesh
Team members	Dr. Tulip Dr Gaurang Ramesh
Contact person	Dr. Gaurang Ramesh E: makamgaurang@gmail.com M: +919945422446 Dr. M. Ramesh E: drramesh@hotmail.com M: +919845006123

Center of Excellence	Department of Minimal Access and Bariatric Surgery, Yashoda Hospital. Hyderabad
In charge	Dr. Kona Lakshmi
Team members	Dr. Rishi Shrivastav Dr. Harishwar Goud Dr. Ruchir Bhavsar
Contact person	Mr Venkat M: +919848541168

Center of Excellence	Center of Excellence of Hernia & Abdominal Wall Reconstruction. Zydus Hospitals, Ahmedabad
In charge	Dr. Vishal Soni
Contact person	Dr. Vishal Soni M: +91 96999 95557

Center of Excellence	Department of MAS, GI, Bariatric and Robotic Surgery, Kauvery Hospital, Bangalore
In charge	Dr. Ganesh K Shenoy
Team members	Dr. Marina Thomas Dr. Amol Jeur
Contact person	Dr. Ganesh K Shenoy M: +91 97393 21584

Center of Excellence	Minimal Access Surgery, Bariatric and Robotic Surgery Manipal Hospital, Kharadi, Pune
In charge	Dr. Sudhir Jadhav
Contact person	Dr. Sudhir Jadhav M: +91 93594 46447

Guidelines for HSI Centre of Excellence

Hernia Society of India invites applications from centres which are a) doing high-volume work in the field of hernia surgery and b) already undertaking regular training courses in hernia surgery to apply to become an HSI Centre of Excellence. This endorsement is purely for the purposes of conducting training courses and is not to be taken as an endorsement for the standard of clinical care provided at the Centre in the field of hernia or other surgeries. Prerequisites In order to be considered an HSI Centre of Excellence the Hospital / Institution must fulfil the following criteria.

- ▶ The Centre applying for this (Medical College / Hospital / Nursing home) should have minimum 50 beds. • The Courses must be directed by a Surgeon who holds MS or DNB in General surgery and is a member of HSI.
- ▶ The Centre must offer both open and laparoscopic surgery for a variety of hernias and the results must be carefully audited and preferably published in peer reviewed journals.
- ▶ Two or more training courses must have been held in the Centre each year for the past three years and at least one of them should have been in the field of hernia surgery.
- ▶ The Centre must have adequate infrastructure in terms of theatres, laparoscopic equipment, HD endocamera, energy sources etc. They should follow autoclaving, ETD or plasma sterilization for all the laparoscopic equipment used for hernia surgery.
- ▶ The Centre must be equipped with adequate facilities for lectures and must have a dry laboratory with endotainers for hands on practice. Virtual reality simulators are optional.
- ▶ The Course Director and Faculty must have appropriate clinical expertise to educate the participants. If live surgery is to be performed and transmitted for the participants, the Faculty must have adequate experience in these procedures.
- ▶ The Course Curriculum must include (but need not be restricted to) the following: Patient selection, preoperative care, instrumentation, technical aspects of surgery, postoperative care, identification and management of complications, follow up and tracking of clinical outcomes.
- ▶ The HSI endorsement is valid only for three years and can be renewed at the end of that period by way of a fresh application. This endorsement is only for courses conducted in the field of Hernia and Abdominal Wall Surgery.
- ▶ The Institution organising the courses must apply for and grant the participants CME points from the State Medical Council.
- ▶ Course details, list of Faculty and participant feedback forms for each course must be submitted to the President and Hon. Secretary of HSI (by way of email) on an annual basis. If the review of these shows the courses to be below par and the deficiencies suggested are not corrected within stipulated time, the recognition of the Centre may be withdrawn.
- ▶ No application fee is required at present, but in future an yearly fee as decided by the Executive Committee of the HSI may be levied on the Centres.

Benefits to the Centre

- ▶ The Centre will be listed as a Centre of Excellence on the HSI website
- ▶ The courses offered at the Centre will be listed on the HSI website
- ▶ The Course Director may include the HSI endorsement on the course brochure or on the course material.
- ▶ The Centres and the courses will be promoted during the annual HSI meeting.

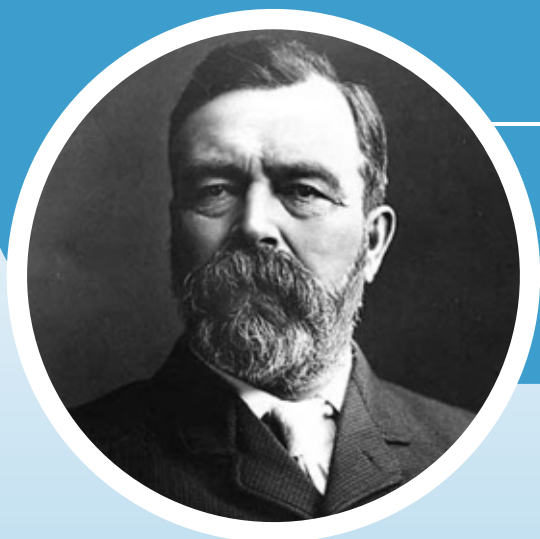
Application Process A formal letter of application along with the following details and photographs (JPEGs) to corroborate the available facilities should be emailed to President - HSI Dr Ramesh Agarwalla (lap.ramesh@gmail.com) and Hon. Secretary-HSI Manish Baijal (mbaijal@yahoo.com). The HSI may designate an observer to visit the centre for inspection before awarding the HSI Centre of Excellence certificate. The travel expenses and local hospitality of the observer should be borne by the Centre.

Application for a Centre to be Recognised as a HSI Centre of Excellence

Quote to remember

“

"I know more than 100 surgeons whom I would cheerfully allow to remove my gall bladder but only one to whom I would like to expose my inguinal canal."



Sir William
Ogilvie

Answer key for crossword

22 - Danny	3 - Wolfgang	24 - Chen	5 - Bougard	8 - McGregor	14 - Thangavelu	15 - Sarfaraz
11 - Mahadar	4 - Pauli	18 - Shinde	7 - Kukleta	9 - Daes	12 - Burdakov	10 - Balasubramaniam
17 - Masurkar	25 - Rosen	12 - Ballecer	16 - Radu	20 - Malcher	1 - Shenoy	2 - Charlotte
13 - Belansky	19 - Heniford	21 - Mnouskin	23 - Jacob	8 - Miguel		
6 - Novitsky						

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