

Primary Mesh Closure of Abdominal Midline Wounds

A double blind Randomized Controlled Trial

Published: 01-10-2007

Last updated: 11-05-2024

The objective of this study is to evaluate the usefulness of closing the abdomen with a prosthetic mesh after laparotomy for aortic aneurysm repair or in patients with a BMI larger than 27 in order to prevent an incisional hernia. The aim is to...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Interventional

Summary

ID

NL-OMON39427

Source

ToetsingOnline

Brief title

PRIMA trial

Condition

- Other condition

Synonym

incisional hernia

Health condition

ventrale hernias na laparotomie (chirurgische complicatie)

Research involving

Human

Sponsors and support

Primary sponsor: Erasmus MC, Universitair Medisch Centrum Rotterdam

Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: - incision, - incisional hernia, - prevention, - surgical mesh

Outcome measures

Primary outcome

Primary outcome

- Incisional hernia occurrence

Secondary outcome

Secondary outcome

- Postoperative complications
- Pain
- Quality of life
- Cost effectiveness

Study description

Background summary

Incisional hernia is the most common longterm complication in abdominal surgery. In about 10 to 20 % of all patients receiving abdominal surgery, an incisional hernia will develop. In the Netherlands this leads to about 5000 incisional hernia corrections each year.

Some high risk groups have a very incidence of incisional hernia: aortic aneurysm patients and patients having an BMI larger than 27. About 30 % of these patients will develop an incisional hernia.

Up to this date only small studies have been performed to investigate the effectiveness of preventive mesh placement. The results are hopeful, but a

randomised controlled trial had not yet been performed.

Study objective

The objective of this study is to evaluate the usefulness of closing the abdomen with a prosthetic mesh after laparotomy for aortic aneurysm repair or in patients with a BMI larger than 27 in order to prevent an incisional hernia. The aim is to reduce the risk of incisional hernia after laparotomy in the study group from 30 % to 10 %.

Study design

This is a double blinded randomized controlled trial. Before surgery, patients will be randomized either to receive primary closure with a suture or primary closure with a prosthetic mesh. A total 480 patients will be randomized into 3 groups.

Intervention

During the closure of the abdomen a mesh will be placed on or in the abdominal wall.

Study burden and risks

The intervention will take place during surgery and will delay the surgery approximately 15 minutes. The risks consist of wound complications related to mesh placement. Surgical site infection and seroma formation are the most important complications. However, these are mild and respond well to therapy. The benefit of mesh placement is the reduction of the incidence of incisional hernia formation from 30 to 10 %.

Contacts

Public

Erasmus MC, Universitair Medisch Centrum Rotterdam

's Gravendijkwal 230
Rotterdam 3015CE
NL

Scientific

Erasmus MC, Universitair Medisch Centrum Rotterdam

's Gravendijkwal 230
Rotterdam 3015CE

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

Every elective midline laparotomy for patients with Abdominal Aortic Aneurysm and patients with a BMI of more than 27.

Exclusion criteria

- Age < 18 years
- Emergency procedure
- Inclusion in other trials
- Aortic reconstruction for obstructive disease

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Double blinded (masking used)

Primary purpose: Prevention

Recruitment

NL
Recruitment status: Recruitment stopped
Start date (anticipated): 03-02-2009
Enrollment: 280
Type: Actual

Ethics review

Approved WMO
Date: 01-10-2007
Application type: First submission
Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Approved WMO
Date: 15-12-2009
Application type: Amendment
Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Approved WMO
Date: 13-09-2010
Application type: Amendment
Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Approved WMO
Date: 15-02-2011
Application type: Amendment
Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Approved WMO
Date: 14-11-2011
Application type: Amendment
Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Approved WMO
Date: 28-05-2013

Application type:	Amendment
Review commission:	METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL18461.078.07