

## ABSTRAK

**Latar Belakang:** Lebih dari 800.000 tindakan hernia *repair* dilakukan setiap tahun. Kasus tersering adalah hernia inguinalis. Terdapat beberapa metode operasi hernia yang bisa dilakukan yaitu laparoskopi *Totally extraperitoneal (TEP)* dan Lichtenstein herniorafi yang menjadi *gold standar*. Pemilihan teknik operasi memiliki beberapa pertimbangan seperti nyeri pasca operasi, waktu, rekurensi, dan komplikasi.

**Tujuan:** Untuk mengetahui perbedaan laparoskopi *Totally extraperitoneal (TEP)* herniorafi dan Lichtenstein herniorafi di RSUP Dr. Kariadi dan RSND.

**Metode:** Penelitian ini adalah penelitian dengan pendekatan observasional-analitik *cross sectional*. Sampel yang digunakan yaitu rekam medis dari RSUP Dr. Kariadi Semarang dan RS Nasional Diponegoro pada rentang Januari 2017 - Desember 2022. Sesuai rumus penelitian analitis kategoril-numerik digunakan 24 sampel. Uji statistik mengenakan uji normalitas *shapiro-wilk*, selanjutnya menggunakan uji non-parametrik *chi square test* dan uji *mann whitney*.

**Hasil:** Nyeri post operasi antara 12 sampel *TEP* dengan 12 sampel Lichtenstein ada perbedaan signifikan ( $p=0,012$ ). Lama perawatan antara *TEP* dengan Lichtenstein terdapat perbedaan yang signifikan ( $p=0,018$ ). Komplikasi jangka pendek infeksi ada perbedaan signifikan ( $p=0,012$ ) sedangkan komplikasi seroma antara *TEP* dengan Lichtenstein tidak terdapat perbedaan signifikan ( $p=0,307$ ).

**Kesimpulan:** Perbandingan antara *TEP* dengan Lichtenstein terdapat perbedaan signifikan pada nyeri post operasi, lama perawatan, dan komplikasi jangka pendek infeksi, sedangkan komplikasi jangka pendek seroma tidak ditemukan perbedaan yang signifikan.

**Kata kunci:** *Herniorafi, Tottaly extraperitoneal, Lichtenstein, Nyeri Post Operasi, Lama Perawatan, Komplikasi Jangka Pendek Infeksi dan Seroma*

## ABSTRACT

**Background:** More than 800.000 hernia repairs are performed every year. The most common case is an inguinal hernia. Several methods of hernia surgery can be performed, namely laparoscopic Totally extraperitoneal (TEP) and Lichtenstein herniorrhaphy which is the gold standard. The choice of surgical technique has several considerations such as postoperative pain, time, recurrence, and complications.

**Objective:** To determine the difference between Totally extraperitoneal (TEP) herniorrhaphy and Lichtenstein herniorrhaphy at Dr. Kariadi and RSND.

**Methods:** This research is a study with a cross-sectional observational-analytic approach. The sample used is medical records from RSUP Dr. Kariadi Semarang and Diponegoro National Hospital in the range January 2017 - December 2022. According to the categorical-numerical analytical research formula, 24 samples were used. The statistical test uses the Shapiro-Wilk normality test, then uses the non-parametric chi square test and the Mann Whitney test.

**Results:** Postoperative pain between 12 samples TEP and 12 samples Lichtenstein there was a significant difference ( $p=0.012$ ). There was a significant difference in the length of stay between TEP and Lichtenstein ( $p=0.018$ ). There was a significant difference in the short-term complications of infection ( $p=0.012$ ) while there was no significant difference in seroma complications between TEP and Lichtenstein ( $p=0.307$ ).

**Conclusion:** In comparison between TEP and Lichtenstein there were significant differences in postoperative pain, length of stay, and short-term complications of infection, while short-term complications of seroma found no significant differences.

**Keywords:** *Herniorrhafi, Totally extraperitoneal, Lichtenstein, Postoperative Pain, Length of stay, Short Term Complications of Infection and Seroma*