

# The ENTREPPMENT trial: comparing treatments for inguinal hernia

<b>Submission date</b> 09/01/2012	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
<b>Registration date</b> 08/02/2012	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 04/08/2021	<b>Condition category</b> Digestive System	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

Hernia (a lump that results from a part of the bowel slipping through a weakness in the abdominal wall) of the groin is a common disease; every year 30,000 hernia repairs are performed in the Netherlands. The main serious adverse event is postoperative chronic pain, not recurrence. A recently completed study showed less postoperative chronic pain after transinguinal hernia repair (TIPP) when compared to Lichtenstein, the reference technique used in the Netherlands.

A new technique transrectus sheath preperitoneal (TREPP) has been developed that is expected to reduce postoperative chronic pain even more. This study will compare both techniques.

### Who can participate?

Adults with an American Society of Anesthesiologists (ASA) classification < 4 (not too much comorbidity), with an unilateral hernia of the groin that has never been repaired before.

### What does the study involve?

TIPP and TREPP will be compared. When a patient is eligible they will be randomly assigned to receive either a repair by TIPP or by TREPP. They are both open repair techniques.

### What are the possible benefits and risks of participating?

There are no benefits.

There are no risks, other than the risk of having surgery.

### Where is the study run from?

The study will be performed in five medical centers in the Netherlands (Radboud University Nijmegen Medical Center; Gelderse Vellei Hospital Ede; St Jansdal Hospital Harderwijk; St. Elisabeth Hospital and TweeSteden Hospital Tilburg/Waalwijk).

The lead center is Radboud University Nijmegen Medical Center.

### When is the study starting and how long is it expected to run for?

The trial will start mid of 2012, expected time for inclusion is 1-1.5 years. Total follow up is 1 year.

Who is funding the study?  
Radboud University Nijmegen Medical Center

Who is the main contact?  
Willem Bökkerink  
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## Contact information

**Type(s)**  
Scientific

**Contact name**  
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## Additional identifiers

**Protocol serial number**  
N/A

## Study information

**Scientific Title**  
The ENTREPPMENT trial: the TransREctus sheath Preperitoneal mesh repair Procedure (TREPP) compared to the TransInguinal Preperitoneal Procedure (TIPP): a randomised clinical trial

**Study objectives**  
TREPP will reduce postoperative chronic pain after inguinal hernia repair with 50%, compared to TIPP.

On 21/02/2014 the following changes were made to the trial record:  
1. The anticipated start date was changed from 01/06/2012 to 20/02/2014  
2. The anticipated end date was changed from 01/06/2014 to 20/08/2016

**Ethics approval required**  
Old ethics approval format

**Ethics approval(s)**  
Approval obtained from CMO region Arnhem-Nijmegen on 24/07/2012, ref 2012/060, local ref NL38842.091.12.

**Study design**

Interventional multi-center randomised controlled trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Inguinal hernia

**Interventions**

800 patients will be randomised into the two operation techniques compared:

1. TREPP (transrectus sheath preperitoneal mesh repair) (400 participants)
2. TIPP (transinguinal preperitoneal repair) (400 participants)

Both hernia repairs are performed in day treatment, or with a total stay of 1 night in hospital. Both groups will visit the outpatient department at 6 weeks, 6 months and 12 months.

A physical exam will be done for evaluation of numbness of the operation area; questionnaires are filled in (SF-36, EuroQol 3D, pain disability index). Total follow up is 1 year.

**Intervention Type**

Other

**Phase**

Not Applicable

**Primary outcome(s)**

Severe adverse events, e.g. postoperative chronic pain, mortality, recurrence, bleeding

**Key secondary outcome(s))**

1. Hospital stay
2. Operation time
3. Return to daily activities (e.g. work)
4. Health status
5. Economic evaluation (cost effectiveness)

**Completion date**

31/03/2018

**Eligibility**

**Key inclusion criteria**

1. Primary, unilateral groin hernia
2. Aged 18-80 years
3. American Society of Anaesthesiologists (ASA) Classification 1-3
4. Signed informed consent

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Upper age limit**

80 years

**Sex**

All

**Key exclusion criteria**

1. Recurrent hernia
2. Scrotal/femoral hernia
3. Acute incarcerated inguinal hernia
4. Psychiatric disease or other reasons making follow-up or questionnaires unreliable
5. Previous preperitoneal surgery (e.g. radical prostatectomy)

**Date of first enrolment**

20/02/2014

**Date of final enrolment**

20/08/2016

## **Locations**

**Countries of recruitment**

Netherlands

**Study participating centre**

**Radboud University Nijmegen Medical Center**

Nijmegen

Netherlands

6525 GA

## **Sponsor information**

**Organisation**

Radboud University Nijmegen Medical Center (Netherlands)

ROR

<https://ror.org/05wg1m734>

## Funder(s)

### Funder type

Hospital/treatment centre

### Funder Name

Radboud University Nijmegen Medical Center (Netherlands)

## Results and Publications

### Individual participant data (IPD) sharing plan

The data sharing plans for the current study are unknown and will be made available at a later date

### IPD sharing plan summary

Data sharing statement to be made available at a later date

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Protocol article</a>	protocol	03/03/2013		Yes	No
<a href="#">Abstract results</a>	Abstract provisionally accepted for ESA congress May 2021 Cologne	02/08/2021	04/08/2021	No	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes
<a href="#">Study website</a>	Study website	11/11/2025	11/11/2025	No	Yes