

10 Critical Steps of Hiatal Hernia Repair and Anti-Reflux Surgery; An Expert Consensus and Literature Review

Methods

A focus group of expert foregut surgeons (*focus*) defined and agreed upon a sequence of critical steps of a hiatal hernia repair.

An anonymous survey of these steps was sent to members of the American Foregut Society (*survey*).

A literature review was conducted (*literature*).

Focus, survey, and literature were compared to compile 10 steps for a successful procedure.

Results

Step	Survey compared to Focus	Literature
Division of the gastrohepatic & phrenoesophageal membrane	Agree 100%	Agree
Initial Exposure of the Mediastinum, Vagal nerve preservation	Agree 82 %	Agree
Dissection of both crus	Agree 86%	Agree
High Mediastinal Dissection	Agree 82%	Agree
Reduction of the Hiatal Hernia	Agree 100%	Agree
Abdominal Esophageal length	Agree 75%	Agree
Bougie Placement	Disagree 89.5%	Agree / neutral
Preform Collis Gastroplasty if GE junction within the chest	Agree 95%	No conclusion
Crural Repair and use of mesh	Agree 82%	Agree
Creation of anti-reflux surgery/ fundoplication	Agree 100%	Agree

Conclusions

Close attention should be paid to the surgical plane when performing a minimally invasive hernia repair.

Preservation of the anterior and posterior vagus nerves are crucial.

This 10-step process can ensure an efficient and safe procedure.