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CORRECTION

Correction to: Pure tissue repairs: a timely and critical revival

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Correction to: Hernia
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In the original publication, author group, abstract text, position of Figure 1, Figure 5 legend, Figure 6 (duplication of figure panels) and the conflict of interest statement were incorrectly published. The corrected text and the figures are given here.

The correct author group should read as "R. Bendavid, M. Mainprize". Dr Vladimir Iakovlev is a consultant (consulted for pathology).

Abstract

Hernias have, for the longest time and still, been misunderstood! Their effective treatment epitomizes the dedication to the science and the art of surgery by the sincere and devoted practitioner, free from commercial persuasions and sponsored social or professional media platforms.

The contribution of Bassini culminating in the Shouldice repair is as valid today as when it was judged the "Gold Standard" barely 25 years ago by so many eminent colleagues! The introduction of synthetics (nylon in 1935) which ushered the tension free repair by Eugene Don Acquaviva (in 1944), then the olefins (polypropylene) in 1959 by Francis Usher did not get established until the mid 1990s. Lichtenstein's ultimate drive in 1989 was based, when one reads carefully his original contribution (AJS, Vol 157, Feb 1989, pp:188–193), on inaccurate anatomical notions but also on misunderstandings of polypropylene which were known to industrial chemists but which surgeons are finally discovering. Polypropylene is not "inert" as stated by Irving Lichtenstein nor is it "unable to harbor infection" nor is it "not subject to deterioration". Large, reliable studies have now reconfirmed that recurrence rates are no better with meshes in the hands of competent surgeons, despite the ubiquitous statement which every publication resonates as a droning cliché that "mesh has reduced recurrences"! Unfortunately, pain has entered the arena as the major and commonest complication of hernia surgery to the point where mesh removal is becoming a serious and challenging "subspecialty". The courts of law, as well, have been successfully forcing surgeons to reconsider their decision making and the future bears watching with renewed interest as patients become more knowledgeable and wish to have a say in the choice of their treatment!

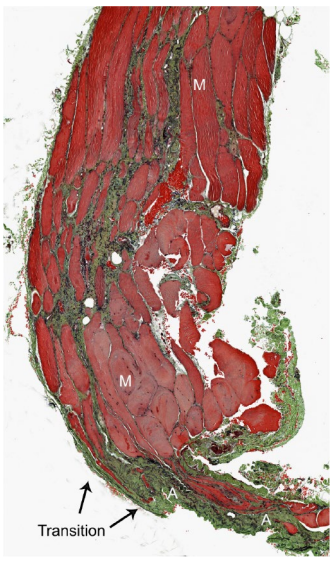

Figure 5 legend should read as:

Evidence of erosion by mesh into the vas deferens, desmin stain, cropped image of a full image scan with magnification approximately equivalent to ×10 objective. The original image is on the left and labeled copy on the right. Desmin stain (brown) highlights vas muscle. Polypropylene fibers are filled yellow to highlight their position, leaving a

The original article can be found online at https://doi.org/10.1007/s10029-019-01972-2.

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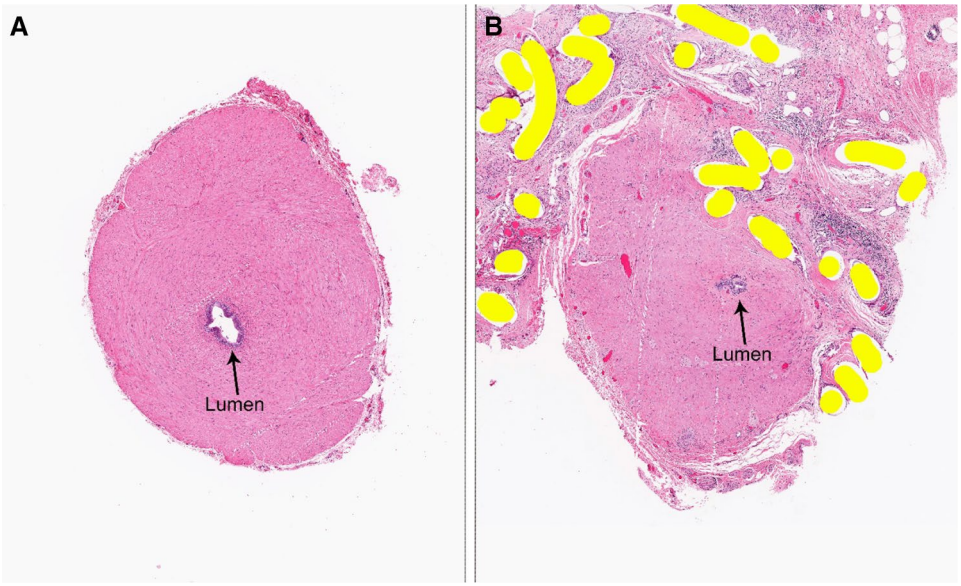
"tooth comb" effect on the vas. Note that muscle is replaced by scar tissue as mesh fibers erode into it and migrate through the vas. Any anatomical structure can be damaged by slow mesh migration in the body (color figure online)".



Conflict of interest

R. B. and V.I. provided medicolegal opinions on plaintiff side.