

## **Abdominal Wall Reconstruction Operative Procedure**

Most patients underwent a midline laparotomy, except for one patient who had a lower transverse incision in order to facilitate a concomitant panniculectomy. The hernia contents were reduced and an intra-peritoneal lysis of adhesions was performed, separating the intra-abdominal contents completely from the anterior abdominal wall. Any necessary bowel surgery was performed and any previously placed synthetic mesh was explanted. Components separation techniques included an anterior bilateral external oblique aponeurosis release, and a posterior rectus sheath release when necessary. An underlay biologic mesh, porcine acellular dermal matrix (PADM) (Strattice®, LifeCell Corporation, Branchburg, NJ) was placed in the intra-peritoneal underlay position and secured to the anterior abdominal wall with circumferential interrupted transfascial fixation sutures. An aggressive attempt at primary suture midline fascial closure was made in all patients. Any excessive skin and subcutaneous tissue was excised to minimize the potential (dead) space between the subcutaneous tissue and the musculofascial layer, and to improve the overall cosmetic result.

## **QUESTION GUIDE**

1. Tell me about what it's been like for you since the completion of your cancer treatment.
2. Have you experienced any challenges following your cancer treatment?
3. How did you become aware of the development of your hernia?  
Probe: What were you experiencing with regards to your hernia?  
Have you experienced limitations as a result of your hernia? In what way?
4. a. Have any treatments been offered to you to help you manage?  
b. What kinds of supports have you had in managing your physical state?  
Probe: Educational, psychosocial, social, spiritual, economic?

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5. Can you describe how you ended up seeing a surgeon who specializes in fixing abdominal wall problems?

6. In what way do you anticipate that the surgery to repair your hernia will make a difference in how you feel or the things you can do?

*Post-op:* Looking back on your experience so far, can you describe the benefits and drawbacks of the surgery?

7. Looking back on your experience, do you think that anything could have been done differently? How?