Very large hiatus hernias are treated via

- **Suture repair**
- **Absorbable mesh repair**
- **Nonabsorbable mesh repair**

**At 5-year follow up:**

- **Recurrent hernia (any size)**
  - Suture repair: 39.3%
  - Absorbable mesh: 56.7%
  - Nonabsorbable mesh: 42.9%

- **After absorbable mesh repair, more frequent:**
  - Chest pain
  - Bloating
  - Diarrhea

**Multicenter prospective double-blind randomized controlled trial (N = 126)**

Mesh repair has no advantages over suture repair in the long run; symptom outcomes are even slightly worse with absorbable mesh repair.

**Watson et al. (2020)**

Five Year Follow-up of a Randomized Controlled Trial of Laparoscopic Repair of Very Large Hiatus Hernia with Sutures Versus Absorbable Versus Nonabsorbable Mesh

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