

### 834 What's The SCORE? Surgeons' Approach to Treating Symptomatic, Clinically Occult, Radiologically Evident Inguinal Hernias

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**Introduction:** The management of symptomatic, clinically occult, radiologically evident inguinal hernias (SCORE-IH) is challenging. This pathology lacks a validated definition and a standardised treatment paradigm to prevent risks of operative management. This study explores current practice amongst surgeons treating SCORE-IH.

**Method:** STEER collaborators disseminated a validated online survey amongst their UK consultants. Responses to the survey were collated on a spreadsheet and analysed with basic percentages.

**Results:** Seventy-three responses were received, including six (8%) international surgeons. UGI and colorectal surgeons were the predominant sub-specialities at 33% and 32%, respectively. Only 26% reported they performed more than 100 IH repairs annually. Less than half of the responders (41%) of surgeons reported more than 50% laparoscopic IH repairs. Nearly two thirds (62%) were unaware of guidelines on the management of SCORE-IH. Imaging chose to manage SCORE-IH included US, MRI, and CT at 71%, 44% and 29%, respectively. Only 14% of surgeons reported they would not consider any imaging. Only 19% would manage conservatively, while 37% would manage operatively.

**Conclusions:** There is skill diversity when treating IH. A lack of guidance and consensus amongst the surveyed surgeons is evident by the heterogeneity in imaging utilisation and varied treatment pathways offered to SCORE-IH patients.