**Robotic repair of postoperative hernias using a mesh in patients underwent major urological procedure in the abdomen**

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**Objective**
Using illustrated video we present our experience in robotic repair of postoperative hernias in patients underwent major urological operations in the middle and lower abdomen.
**Material and method**
The video presents step-by-step the robotic repair a large ventral hernia located in the extraction site of abdominal wall in a 60 years old patient underwent robotic cysteoprostatectomy and extensive pelvic lymphadenectomy with intracorporeal creation of neobladder. Five trocars were inserted after initially laparoscopic and then robotic extended adhesiolysis until the anterior abdominal wall was free of adhesions. The hernia defects were repaired using dual-sided, expanded polytetrafluoroethylene (ePTFE) mesh fixation. The mesh was secured in place with specialized clips.
**Results**
The total operative time was 95 minutes. The hospital stay was 2 days and paracetamol was enough for pain control. During a follow up of 6 months none complain of clip site pain or discomfort was reported. Two additional cases, one after robotic radical prostatectomy and other after open radical cystoprostatectomy with neobladder formation, were successfully managed robotically
**Conclusions**
Robotic ventral hernia repair is feasible and aesthetically acceptable procedure. In addition, has the advantages of a minimal invasive procedure. That means short hospitalization, less pain and fast return of the patient in daily routine.