Introduction: The Lichtenstein technique is currently the first choice to repair unilateral primary groin hernias. Many methods have been used recently for mesh fixation in Lichtenstein mesh repair to prevent mesh dislocation and recurrence. In contrast to penetrating fixation known to cause acute chronic pain, adhesive fixation is becoming increasingly popular as it reduces markedly the risk of injury and chronic pain. Synthetic glue (N-butyl 2 cyanoacrylate) have been used in the mesh fixation since it does not interfere with normal wound healing and does not produce local thermal injury.
Aim: To compare the effectiveness of synthetic adhesive sealing (n-butyl-2-cyanoacrylate) for mesh fixation with polypropylene suture material in Linchтенstein inguinal hernioplasty.

Methodology: 60 patient diagnosed to have unilateral inguinal hernia have been included in this study from August 2015 till July 2017. Initially patients were grouped into two groups randomly. One group (group A) have undergone mesh fixation with polypropylene suture material and another group (group B) with synthetic glue (N-butyl 2 cyanoacrylate). Operative time have been noted for both groups. Prospective observation was done on regular intervals of 12 hrs, 24hrs, 72hrs, 7 days and 14 days to assess the post operative pain and post operative complications in both groups. Time to get the normal activity have also been compared between both groups.

Results: The study showed shorter operative time for mesh fixation with synthetic adhesive glue when compared to conventional mesh fixation with polypropylene material. Post operative pain was significantly low in group B. One surgical site infection was reported in the group A. Time taken to get back to the normal activity was same for the both groups. Based on this data, mesh fixation with synthetic glue is more effective than polypropylene suture material.