

INTRODUCTION

Laparoscopic surgery promises to be a major revolution in the field of general surgery (*Siperstein, 1994*).

The widespread acceptance of this technique has been largely propelled by public awareness that laparoscopic surgery is associated with less pain, shorter hospital stay, quicker return to normal activities and better cosmetic results (*Mori et al., 1995*).

Laparoscopic cholecystectomy is the first shining example of the success of endoscopic surgery which obviates all the disadvantages of opening the abdominal cavity (*Saunders, 1995*).

Several techniques have been developed to repair inguinal hernias laparoscopically. These techniques include transabdominal preperitoneal repair, placement of an intraperitoneal on - lay mesh and laparoscopic extraperitoneal herniorrhaphy (*Barbot and Gomella 1994*).

Varicocele is an extremely common entity, present in about 15% of the male population. The optimum management of varicoceles requiring intervention remains controversial. Laparoscopic varix ligation represents one of the developments in the management of this condition (*Tan et al., 1995*).

Acute appendicitis is a common general surgical problem that may be difficult to diagnose. Laparoscopy is an excellent aid in diagnosis and laparoscopic appendectomy can be performed easily. Laparoscopic appendectomy is becoming much more attractive as it allows out patient or

overnight stays in the hospital and enables the patient to return to normal activity in few days with less discomfort and disfigurement (*Zaninotto et al., 1995*).

AIM OF THE WORK

The aim of this study is to evaluate the merits of laparoscopic surgery over the traditional surgery with regard the operative time, postoperative use of pain medications, complications, hospital stay and time of return to normal activity.