The fixed combination of collagen with components of fibrin adhesive

- A new hemostyptic agent in skull base procedures.

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Abstract:

CSF leak is till one of the major sources of morbidity after extensive skull base procedures. Of the

various standard closure techniques of traumatic or iatrogenic dural defects, none provides a really

watertight, persistent closure. Even the supplementary use of fluid fibrin glue did not substantially

improve the rate postoperative CSF leaks. The application of a collagen sheet covered with a fixed

layer of solid components of a fibrin tissue glue (TachoComb) overcomes the major drawbacks of

dual sealing in skull base surgery. The dural defects of 58 patients undergoing extensive skull base

procedures were sealed with this new hemostyptic agent. The series includes 44 patients

undergoing primary surgery, 6 patients with traumatic or iatrogenic tears of venous sinuses, and 8

patients with postoperative leaks after previous skull base surgery, none of the patients had

postoperative CSF leakage or venous rebleeding. One patients developed a delayed

pneumatocephalus. All cases of patient CSF fistulas were resolved without any adjuvant therapy.

Preliminary experience shows that the good sealing and hemostyptic performance of this new agent

will considerably reduce the risk of postoperative CSF leak and infection after skull base procedures.