

Intralesional injection of Tisseel fibrin glue for resection of lymphangiomas and other thin-walled orbital cysts.

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Abstract:

PURPOSE: Surgical removal of orbital lymphangiomas is often difficult because the capsule of these lesions is fragile, and, once violated, it tends to collapse, making identification of residual tumor difficult and dissection often incomplete. A surgical technique combining partial controlled decompression of the lesion with intralesional injection of Tisseel fibrin glue is evaluated to determine its effectiveness in resecting the lesion and preventing recurrences.

METHODS: This is a retrospective interventional case series. Three young patients, two with lymphangiomas and one with congenital hydrocystoma, underwent surgical resection of their thin-walled cystic lesions of the orbit with the use of intralesional injection of Tisseel fibrin glue. Resolution of the signs and symptoms, complications of the surgery, and recurrence of bleeding are the parameters studied.

RESULTS: All 3 patients had improvement of their signs and symptoms. None had complications related to the surgery, and no recurrence of bleeding occurred during the follow-up period.

CONCLUSIONS: Our study suggests that this surgical technique with intralesional injection of Tisseel fibrin glue is an effective treatment modality for the resection of lymphangiomas and other orbital thin-walled cystic lesions.