

Effects of an autologous fibrin sealant on lymphatic leakage after radical cystectomy: A matched case-control study.

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Abstract:

Aim: The aim of the present study was to investigate the effect of an autologous fibrin sealant (Vivostat) on the prevention of lymphatic leakage after radical cystectomy. **Patients and Methods:** Patients who underwent laparoscopic radical cystectomy (LRC) or robot-assisted radical cystectomy (RARC) for the treatment of bladder cancer were enrolled. Autologous fibrin sealant was applied after the completion of bilateral pelvic lymph node dissection. The data were compared with those from matched RARC patients in a historical cohort. **Results:** Ten consecutive RARC or LRC were performed using an autologous fibrin sealant. A statistically nonsignificant reduction in drain output (1165.5 mL, range = 225-3150 mL) was observed compared with 10 matched historical RARC patients who did not receive the autologous fibrin sealant (1927.2 mL, range = 240-4010 mL). No difference in the number of days of in-situ drainage or the length of hospital stay was found. Two patients in the control group developed asymptomatic lymphocele. One patient in the group treated with the autologous fibrin sealant developed deep vein thrombosis after RARC. **Conclusion:** The use of an autologous fibrin sealant did not reduce lymphatic leakage after radical cystectomy.

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