

Fibrin glue and seroma formation following abdominoplasty.

[German]

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Abstract:

Seroma formation is one of the most frequent complications following abdominoplasty. The effect of intraoperative fibrin sealant on the formation of seroma was investigated in patients who had an abdominoplasty. The relevance of slow vs accelerated fibrin polymerization was determined. Two different thrombin concentrations (4A IE vs 500A IE thrombin/ml) of fibrin sealant were used in two groups of 20 patients each. The control group consisted of 20 patients with abdominoplasties without fibrin glue adhesion. The group with slow-reacting fibrin sealant (4A IE) had a significantly lower rate of seroma formation than both the high concentration fibrin group and controls ($P < 0.032$ and $P < 0.018$, respectively). In addition, the amount of postoperative drainage was significantly lower in the low-dose group ($P < 0.000$). Patients with seroma had a significantly higher weight of resected tissue ($P < 0.04$). The amount of postoperative drainage, age, and body/mass index had no significant effect on the prevalence of complications. The use of slow reacting, low-dose fibrin glue demonstrated a protective effect against the formation of seroma following abdominoplasty. The amount of postoperative drainage was significantly lower. © Springer Medizin Verlag 2007.