

# **Axillary lymphadenectomy for breast cancer and fibrin glue.**

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## **Abstract:**

**BACKGROUND:** Axillary lymphadenectomy or sentinel biopsy is integral part of breast cancer treatment, yet seroma formation occurs in 15-85% of cases. Among methods employed to reduce seroma magnitude and duration, fibrin glue has been proposed in numerous studies with controversial results.

**METHODS:** Eighty patients underwent quadrantectomy or mastectomy with level I/II axillary lymphadenectomy; a suction drain was fitted in all patients. Fibrin glue spray were applied to the axillary fossa in 40 patients; the other 40 patients were treated conventionally.

**RESULTS:** Suction drainage was removed between post-operative Days 3 and 4. Seroma magnitude and duration were significantly reduced ( $p=0.004$  and  $0.02$ , respectively), and there were fewer evacuative punctures, in patients receiving fibrin glue compared with the conventional treatment group.

**CONCLUSIONS:** Use of fibrin glue does not always prevent seroma formation, but does reduce seroma magnitude, duration and necessary evacuative punctures.