Effectiveness of an absorbable fibrin sealant patch to reduce lymphoceles formation after axillary lymphadenectomy for breast cancer: A matched-pair analysis.

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Publication Date: 2014

Abstract:

Background This study evaluated the use of TachoSil as an adjunctive therapy for reducing axillary lymphocele formation.

Methods Eighty-six patients diagnosed with breast cancer N+ and treated with axillary lymphadenectomy received a TachoSil patch in the axillary wound. Using a database of patients without placing a hemostatic patch, we applied a matched case-control in a 1-to-2 fashion. Multiple and logistic regression analyses were used to evaluate postoperative results.

Results Patient group with TachoSil showed a significantly lower drainage volume (P <.001) and the length of stay was significantly shorter (P <.001). The number of patients with evacuative punctures was 24.5% in the group with patch versus 51.2% in the control group (P <.001). In multivariate analysis, the use of TachoSil was a significant predictor of reducing axillary drainage volume (P <.001), mean length of hospital stay (P =.001), and number of evacuative punctures of lymphocele (odds ratio.264, 95% confidence interval.144 to.484, P <.001).

Conclusion The use of TachoSil in axillary lymphadenectomy may be a safe and useful treatment option for reducing axillary drainage volume, incidence of symptomatic lymphocele, and hospital stay.