Lymph fistulae following lymph node dissection. [German]

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Abstract:

The fibrin sealing was employed in connection with lymph node dissections - on one hand

intraoperatively in order to avoid lymph fistulae (n = 26), on the other hand postoperatively in

treatment of manifest lymph fistulae (n = 9). Thereby lymph fistulae could be avoided in 96.2% (n =

25) resp. a guick successful treatment of the lymph fistulae could be achieved in 7 of 9 cases (77%).

On the average a quantity of 1 ml of fibrin sealant was sufficient; a high concentration of aprotinin

(3500 IU) and thrombin (500 IU) was chosen. No side effects on part of the fibrin sealing were

noted.