Artiss human fibrin sealant glue for mastectomy flap adherence.

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Publication Date: 2015

Abstract:

Aim: To demonstrate the role of human fibrin sealant glue for mastectomy flap adherence. Methods:

We audited the use of ARTISS fibrin sealant glue versus surgical drain placement for six months at

a District General Hospital, looking at two primary endpoints; discharge within 23 hours and

post-operative complications. All mastectomy patients were included and complications were

identified up to 60 days. Data was collected prospectively from physical and electronic records.

Results: Complete data was collected for 18/19 patients who underwent mastectomy in the study

period. The rate of discharge within 23 hours using fibrin sealant glue was 6/7 patients compared

with 5/8 with surgical drains. For the four patients who had neither drain nor glue, two were

discharged within 23 hours. The rate of seroma with fibrin glue was 1/7 versus 4/8 with a drain.

Using neither drain nor glue 2/4 patients developed seromas and one was re-admitted. Conclusion:

The use of fibrin sealant glue resulted in reduced complications and earlier discharge compared with

surgical drains for mastectomy patients in this small sample. Larger scale studies are required to

demonstrate statistical significance, but fibrin sealant glue may negate the use of drains, expedite

discharges and reduce costs from community nursing, prolonged admissions, drain complications

and delays starting adjuvant treatment.