

# **The use of fibrin glue in the surgical treatment of burned patients.**

**[Italian]**

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## **Abstract:**

On the basis of a more than twenty years experience in the field of the surgical treatment of the extensively burned patients, the use of a new technical mean: a human fibrin glue, has been evaluated. For that purpose clinical data regarding 610 burned patients (1973-1985) were examined. A group of 35 patients (50-100% burned body surface) was selected and for patient number, surgical times and behaviour of the grafting procedures (meshgrafts) were recorded. The listed parameters were compared with the similar ones related to a series of five extensively burned patient (22 grafting procedures) in which the mesh-grafts were fixed by the exclusive aid of the above mentioned fibrin glue. No significant differences were found between the first and the second group of patients comparing number and behaviour of grafting procedures, although - in our opinion - the 'take' of skin grafts glued by the aid of human fibrin seemed accelerated. Big differences, on the contrary, were found comparing surgical times; the group of patients grafted using fibrin glue showed surgical times 30-40% shorter than those related to the previous group. Although the surgical use of fibrin glue has higher cost than the standard suture, the cost/benefit ratio has to be considered favourable in sight of the drastic reduction of surgical times. Potential biological hazard connected with the surgical use of human fibrin (virus infections) should be considered as a minimal additional risk in politransfused patients.