The use of fibrin glue as hemostatic in endonasal operations: A

prospective, randomized study.

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Publication Date: 2002

Abstract:

Operations like septoplasty, rhinoplasty, nasal septal reconstruction and conchotomy may produce

bleeding and postoperative hematoma. Twohundredfour patients undergoing septoplasty and

conchotomy operations were entered into a prospective study. Patients were randomly assigned to

one of three treatment groups: Group I, septoplasty + conchotomy + nasal packing; Group II,

septoplasty + conchotomy + fibrin glue; Group III, septoplasty + conchotomy + fibrin glue +

transseptal suturing. To stop bleeding, we used the second generation surgical fibrin sealant Quixil

and compared it with nasal packing. To increase protection against possible intraseptal hematoma

we tried transseptal suturing at the end of a standard septoplasty operation. Our results show that

the usage of the Quixil fibrin glue by aerosol spraying in endonasal operations is more effective and

convenient than the usage of nasal packing. This combination of fibrin glue and the transseptal

suturing substitutes the role of nasal packing in preventing postoperative intranasal hematoma.

However, the transseptal suturing combined with the glue is not justified for the patients as no

statistical difference was observed between Groups II and III in terms of occurrence of postoperative

complications.