

Fibrin sealant sclerotherapy for treatment of lymphoceles following renal transplantation.

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Publication Date: 2003

Abstract:

PURPOSE: Fibrin sealant is used in various surgical fields for hemostasis and as an adhesive to approximate tissues. Its use was recently reported as a sclerosing agent for percutaneous treatment of lymphoceles following renal transplantation. We report on the use of fibrin glue sclerotherapy at this institution for the management of renal transplant related lymphoceles.

MATERIALS AND METHODS: We reviewed the records of 8 patients at a single institution with lymphoceles after renal transplantation treated with percutaneous fibrin glue sclerosis.

RESULTS: Treatment success was achieved in 6 patients (75%), with resolution of lymphoceles assessed with clinical and imaging findings. Four patients (50%) required 2 applications of fibrin sealant, with 2 (25%) subsequently requiring surgical management of the lymphoceles. Clinical followup averaged 27.7 months (range 4 to 44). Complications included lymphocele recurrence, clogging of drainage catheters and catheter dislodgement.

CONCLUSIONS: The experience of 8 patients suggests that fibrin glue sclerotherapy may be considered a safe and effective method of treating symptomatic lymphoceles when simple percutaneous drainage has failed. The percutaneous approach does not require hospital admission and is less invasive than surgical treatment.