The use of fibrin adhesive for hemostasis after liver resection.

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Abstract:

Bleeding, biliary fistula and subphrenic abscess represent the major postoperative complications

after liver surgery. Many different adjuvant methods have been developed for control of hemorrhage

from the raw surface of liver, but the superiority of any single method remains to be proved. The use

of a two-component fibrin adhesive for the control of solid organ bleeding seems to be promising.

This study was to evaluate the efficacy of this fibrin adhesive for control of postoperative bleeding in

liver surgery. Forty patients were randomized into two groups, similar in all demographic and clinical

conditions. Fibrin adhesive was applied to the raw surface of liver resections at the end of

operations for 20 patients. Nothing was applied for the control group. Postoperative bleeding was

estimated by multiplying the drain amount by the free hemoglobin concentration, every day.

Estimated postoperative bleeding was 8.12 +/- 5.65 gm for patients with fibrin adhesive, 15.57 +/-

14.43 gm for control group. Fibrin adhesive has been used in the treatment of injury to the liver and

spleen. In this study, it proved to be useful in the control of postoperative bleeding in liver resection,

and hopefully decreasing morbidity.