Influence of the intraoperative use of fibrin glue on postoperative lymphocele formation and drainage fluid production in renal

transplantation patients. [German]

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Abstract:

In a randomized prospective study we examined 100 renal transplant patients including 20 children,

to test the hypothesis that intraoperative application of clotting factors (in the form of fibrin glue)

reduces the postoperative lymph flow and the frequency of lymphocele formation. The study showed

that the use of fibrin glue during renal transplantation did not reduce the postoperative production of

drainage fluid or lymphocele formation. The postoperative lymph flow was not related to the

formation of lymphoceles. In adults the use of higher doses of immunosuppressants seems to

increase the risk of lymphocele formation. On the other hand children have a very low rate of

lymphocele formation even when high doses of immunosuppressants are used. The postoperative

lymph has a constant composition of erythrocytes and leucocytes. The plasma protein extravasation

decreased postoperatively and was influenced by the plasma protein content. From these results we

conclude that the postoperative frequency of lymphocele formation cannot be reduced by

intraoperative use of fibrin glue in the chosen protocol.