Use of a sprayed fibrin hemostatic sealant after laser therapy for

hereditary hemorrhagic telangiectasia epistaxis.

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Abstract:

BACKGROUND: Hereditary hemorrhagic telangiectasia (HHT) is a relatively common autosomal

dominant condition. Epistaxis is a frequent manifestation, often occurring daily and requiring iron

and blood transfusions. Surgery often is bloody and difficult. The aim of this study was to evaluate

the effectiveness of a sprayed fibrin, hemostatic sealant in preventing postoperative epistaxis after

laser treatment of nasal mucosa in HHT. Fibrin sealant was compared with nasal packing for

likelihood of postoperative epistaxis and financial impact including material costs and hospitalization

fees.

METHODS: Retrospective review was performed of 64 individual laser treatments for epistaxis in

HHT patients at the University of California, San Diego, Medical Center between 2002 and 2005.

Nasal packing was used in 30 procedures and fibrin sealant was used in 34 procedures.

RESULTS: Six of 30 (20%) procedures using postoperative nasal packing required admission with

an average hospital expense of \$5914. One of 34 patients (3%) in the fibrin sealant group required

hospitalization (p = 0.04).

CONCLUSION: Aerosolized fibrin sealant prevents postoperative epistaxis after nasal laser

treatment in HHT patients. Compared with traditional nasal packing we found improved patient

comfort and recovery with substantial cost savings.