

Drug targets in colonoscopic polypectomy: biological sealants with special reference to fibrin-glue (tissucol). [Review] [26 refs]

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Abstract:

The increasing outpatient use of colonoscopy in the diagnostic study and prophylaxis of colon diseases has allowed early identification of polypoid neoformations, thus indicating their increased incidence during the asymptomatic phase. In this respect, the application of biological sealants immediately before the polypectomy has represented a novel therapeutic strategy in the treatment of these preneoplastic lesions. The injection of biological sealants with needle under the polyp peduncle or sub-mucosa has demonstrated a protective action on the electrocoagulated area, an anti-haemorrhagic effect owing to the strengthened seal of the eschar that is formed, and a facilitated tissue regeneration, respectively. The author report his experience acquired over the past five years with regard to the use of biological sealant in colonoscopic polypectomy and conclude that biological sealants, a human fibrin glue, which utilises components of the human plasma, may allow a more generous removal of neoformations, the absence of post-polypectomy complications and, consequently, the dramatic reduction of time of patient's admission in the hospital. In fact, all patients were discharged after two hours from polypectomy, thus implying a better quality of life for patients, in the absence of post-operative complications and a reduction of non-medical costs.

[References: 26]