Fibrin glue reduces the duration of lymphatic drainage after lumpectomy and level II or III axillary lymph node dissection for

breast cancer: a prospective randomized trial.

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Abstract:

This randomized prospective study investigated the effect of fibrin glue use on drainage duration

and overall drain output after lumpectomy and axillary dissection in breast cancer patients. A total of

100 patients undergoing breast lumpectomy and axillary dissection were randomized to a fibrin glue

group (N=50; glue sprayed onto the axillary dissection site) or a control group (N=50). Outcome

measures were drainage duration, overall drain output, and incidence of seroma. Overall, the fibrin

glue and control groups were similar in terms of drainage duration, overall drain output, and

incidence of seroma. However, subgroup analysis showed that fibrin glue use resulted in a shorter

drainage duration (3.5 vs. 4.7 days; p=0.0006) and overall drain output (196 vs. 278 mL; p=0.0255)

in patients undergoing level II or III axillary dissection. Fibrin glue use reduced drainage duration

and overall drain output in breast cancer patients undergoing a lumpectomy and level II or III axillary

dissection.