

# **Tranexamic Acid Mouthwash Versus Autologous Fibrin Glue in Patients Taking Warfarin Undergoing Dental Extractions: A Randomized Prospective Clinical Study.**

Authors: Carter G., Goss A., Lloyd J., Tocchetti R.

Publication Date: 2003

## **Abstract:**

**Purpose:** The aim of this prospective study was to compare the effectiveness of a 4.8% tranexamic acid mouthwash versus an autologous fibrin glue preparation to control hemostasis in patients therapeutically anticoagulated with warfarin who required dental extractions without interruption of their treatment. **Patients and Methods:** The 49 patients who underwent 152 dental extractions were randomly allocated to 2 groups: Group A were required to rinse with 10 mL of a 4.8% tranexamic acid solution 4 times a day for 7 days postoperatively. Group B received autologous fibrin glue intraoperatively. The international normalized ratio was measured on the day of the procedure. All procedures were performed on an ambulatory basis by the same surgeon. **Results:** Of the 49 patients, 2 presented with postoperative bleeding (4%). Both patients were from the autologous fibrin glue group and were found to have grossly elevated international normalized ratios on the day of the bleeding that was unaccounted for. **Conclusions:** This study supports the consensus that dental extractions can be performed without modification of oral anticoagulant treatment. Local hemostasis with an absorbable oxidized cellulose mesh, tranexamic acid, and sutures is the more cost efficient of the 2 methods compared; however, autologous fibrin glue has an important role in patients unable to use a mouthwash effectively. © 2003 American Association of Oral and Maxillofacial Surgeons.