

Effect of fibrin glue in the reduction of postthoracotomy alveolar air leak.

Authors: Wong K, Goldstraw P

Publication Date: 1997

Abstract:

BACKGROUND: Intraoperative use of fibrin glue has been advocated in reducing postthoracotomy alveolar air leak, although most studies have not been randomized and have focused on its routine use after lung resection.

METHOD: This study specifically addresses the effectiveness of fibrin glue in reducing alveolar air leak only in patients considered intraoperatively to have continued moderate to severe alveolar air leak after all conventional measures to reduce it have been used.

RESULTS: During a 24-month period, 66 patients undergoing lobectomies, segmentectomies, or decortication were randomized either to serve as controls ($n = 33$) or to have fibrin glue sprayed on the "raw" lung surface ($n = 33$). The median duration of intercostal drainage and in-hospital stay was 6 and 9 days, respectively, in the control group and 6 and 8 days, respectively, when fibrin glue was used. Statistical analysis revealed no differences between the groups.

CONCLUSION: Fibrin glue does not add to conventional techniques in reducing moderate to severe alveolar air leak after thoracic operations.