

[Biological glue does not reduce lymphorrhoea after lymph node excision. Randomized prospective study on 40 patients]. [French]

Authors: Vaxman F, Kolbe R, Stricher F, Boullenois JN, Volkmar P, Gros D, Grenier JF

Publication Date: 1995

Abstract:

The aim of this prospective and randomized study, was to demonstrate the benefit by using fibrin glue after axillary lymph node dissection. From January 1990 to January 1991, forty females were randomized before surgery for breast cancer: 20 patients of the group A underwent additional application of fibrin glue (5 ml containing 500 IU of thrombin) by spray only in the area of axillary dissection, while the 20 patients of group B acted as the control group. The two groups were compared for age, number of nodes removed and involved, drainage volume and duration and complications. Student's t test, Mann and Whitney non parametric test and chi 2 were used when appropriate for statistical analysis. The two groups were well balanced for age, number of nodes removed and involved, staging and histologic findings. The average volume of lymphorrhoea in the lymph node dissection area was greater after use of fibrin glue (410.4 ml) than in controls (275.5 ml, $p = 0.016$). No difference was noted between the two groups for the volume of drainage of the mastectomy or lumpectomy site or, for the total volume of drainage. Drainage durations as well as hospital stay were similar. Six complications occurred in group A, and one in group B ($p = 0.037$). (ABSTRACT TRUNCATED AT 250 WORDS)