Fibrin Glue Treatment of Low Rectal and Pouch-Anal Anastomotic Sinuses.

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Abstract:

PURPOSE: This report describes a treatment method for patients with persistent anastomostic

sinuses in which fibrin glue is used. METHODS: A retrospective review was conducted of the

medical records of seven patients with radiologically documented sinus tracts after restorative

proctocolectomy or low rectal anastomosis was managed with fibrin glue obliteration of the tract.

The sinus was gently debrided with a curette and then filled with fibrin glue. Postoperatively, the

patients received metronidazole 1.5 g per day in divided doses for one week. Outpatient

examination of the internal opening was performed at 1, 3, and 12 weeks postoperatively.

RESULTS: In all patients, healing of the sinus was observed after one week. After an average of

11.2 months (range, 3-15) of follow-up there were no recurrences and no episodes of pelvic sepsis.

CONCLUSION: On the basis of this experience, we believe that fibrin glue injection may be an

alternative method of managing pelvic anastomotic sinuses.