Collagen patch coated with fibrin glue components. Treatment of suture hole bleedings in vascular reconstruction.

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Abstract:

Background. Bleeding from suture holes during vascular reconstruction, particularly when polytetrafluoroethylene (PTFE) prostheses are used, is still a problem which can lead to intraoperative delay and increased blood loss. The aim of this prospective, randomised, open, controlled multicentre study was to evaluate whether the use of a new local haemostyptic would reduce intraoperative blood loss and the time to haemostasis. Methods. Thirty patients received a new haemostyptic (TachoComb H, Nycomed Pharma AG), whereas another 30 patients were treated with compresses. The vascular reconstructions were either anastomoses or patch angioplasties and were performed using PTFE vascular prostheses. Results. The mean time to haemostasis of suture hole bleeding in the haemostyptic group (326.0 sec) was significantly shorter compared to the control group (514.3 sec) ($p=0.006$). The median intraoperative blood loss was 24.5 g in the treatment group and 57.3 g in the control group ($p=0.045$). Conclusions. It was shown that collagen patches coated with components of fibrin glue significantly reduce the time to haemostasis as well as blood loss at the operation site in patients undergoing vascular reconstruction with PTFE grafts.