Platelet gel sealant use in rhytidectomy.

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Abstract:

BACKGROUND: A prospective study was used to evaluate the efficacy of a commercially available

platelet gel product as a sealant to decrease postsurgical drain fluid rates and volumes in patients

who have undergone rhytidectomy procedures. Quantitative assessments of postoperative drain

fluid outputs were compared in subjects who did and did not receive platelet gel treatment.

METHODS: Autologous platelet concentrate was prepared from each subject (n = 19), combined

with bovine thrombin to form a platelet gel, and applied during the rhytidectomy procedure. Surgical

drains were placed and effluent was collected postoperatively at 8-hour intervals for 24 hours and

the volumes were recorded. A retrospective examination of surgical drain output over time in

subjects (n = 14) who did not receive platelet gel treatment was performed; this group served as the

control group.

RESULTS: Subjects who received the platelet gel sealant treatment had significantly decreased

surgical drain fluid levels over 24 hours [109 +/- 8.5 ml (mean +/- SEM)] compared with subjects

who did not receive the platelet gel sealant (78  $\pm$ 7.5 ml) (p < 0.02). From 0 to 8 hours

postoperatively, platelet gel-treated subjects had a mean 35 percent decrease in fluid levels

compared with the controls (p < 0.03). No difference in surgical drain outputs was observed from 8

to 16 hours between the two experimental groups. From 16 to 24 hours, the control group had

increased mean fluid levels (20 percent) and the platelet gel sealant group output levels decreased

(50 percent).

CONCLUSIONS: Platelet gel sealant treatment was associated with decreased surgical fluid drain output in the first 24 hours postoperatively.