Intrathoracic fibrin glue for postoperative pleuropulmonary fistula.

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Abstract:

Twenty cases of persistent pleuropulmonary fistula after a thoracic surgical procedure were

successfully treated with fibrin glue injection into the thoracic cavity through a drainage tube. A new

technique, the overlying method, which is a modification of the conventional technique of fibrin glue

injection, was devised. Each patient received one to four injections (mean number, 1.6). This

method resulted in closure of the pleuropulmonary fistula in all but 1 patient. Minor complications

included pain in 1 patient and fever in 3 patients. A control study involving 24 patients with

pleuropulmonary fistula was performed. Autoblood, OK-432, and tetracycline were used instead of

fibrin glue. The fistula resolved in 12 patients. Complications after injection included pain in 15

patients, fever in 10, and occlusion of the chest tube in 4. With our new method, patients rarely

exhibited pain and fever, and occlusion of the chest tube did not occur.