The use of fibrin glue for fixation of acellular human dermal allograft in septal perforation repair.

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Abstract:

Objectives: Acellular human dermal allograft used as an interpositional graft between mucoperichondrial flaps has been shown to be effective in the repair of septal perforations. The material is typically sutured to the septum, but this can be technically difficult. We describe a technique in which fibrin glue is used to secure the acellular human dermal allograft for septal perforation repair. Study design: A retrospective case series of 5 patients who underwent this procedure are reviewed. Methods: Five patients with preexisting septal perforations underwent septal repair using fibrin glue to secure the interpositional acellular human dermal allograft. The graft was first placed between the mucoperichondrial flaps, and 1/3 cm³ of fibrin glue was applied to both sides. One side was then covered with a bipedicled mucosal flap and compressed for 5 minutes to allow for fixation. Results: The use of fibrin glue compared with conventional suturing decreased the length of the procedure by approximately 30 minutes. At the 3-month postoperative examination, all 5 patients were found to have successful outcomes. Conclusion: The use of fibrin glue for fixation of the acellular human dermal allograft in septal perforation repair is technically less difficult and reduces the length of the procedure, and we believe it reduces graft migration when compared with conventional suturing techniques.