# Efficacy of fibrin sealant in reducing hemorrhage after a loop electrosurgical excision procedure.

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Publication Date: 2012

## Abstract:

BACKGROUND/AIMS: We examined the association of fibrin sealant use with post-operative hemorrhage in patients who underwent a loop electrosurgical excision procedure (LEEP).

METHODS: We retrospectively collected clinicopathologic data of 344 patients who underwent LEEP at our institute between 2007 and 2009. We defined hemorrhage which occurred between 1 and 30 days after LEEP and required electrocautery to achieve hemostasis as severe secondary hemorrhage (SSH). We determined whether or not the use of fibrin sealant during LEEP was associated with a decreased occurrence of SSH. In addition, we examined the associations of other clinicopathologic variables with SSH and fibrin sealant use.

RESULTS: SSH occurred in 6 of 200 patients (3%) with fibrin sealant and in 12 of 144 patients (8%) without fibrin sealant. Based on univariate analysis, the use of fibrin sealant was associated with SSH ($p = 0.028$). However, age, surgeons and pathologic diagnosis were not associated with SSH. Based on multivariate analysis, the use of fibrin sealant was associated with less SSH ($p = 0.033$, OR = 0.328, 95% CI 0.117-0.917).

CONCLUSION: Fibrin sealant use reduces the incidence of severe post-operative hemorrhage after LEEP.