

Use of a biological glue in partial pulmonary excision surgery.

Results of a controlled trial in 50 patients. [French]

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Abstract:

A controlled study concerning the surgical use of a fibrin glue was conducted in 50 patients undergoing partial pulmonary excision. In 25 of these patients, chosen at random, hemostasis and aerostasis of the fissural, and/or intersegmentary dissection planes were achieved by electrocoagulation, in the other 25 by the application of fibrin glue. The statistical study did not show any significant difference between the two groups in terms of the surgical indication, the type of excision and the associated surgical procedures (pleurectomy and parietectomy). No significant statistical difference was observed concerning the quality of aerostasis, the post-operative drainage, the persistence of residual collection or faulty reexpansion after removal of the latter, and the necessity for repeated drainage. The same applied to the length of post-operative hospital stay. This study seems to demonstrate that the surgical application of fibrin glue on the fissural and/or intersegmentary dissection planes is feasible but, as compared to electrocoagulation, does not significantly improve the quality of the surgical results for partial pulmonary excision; however its use could reduce the duration of post-operative drainage.