



LETTER TO EDITOR

Does kaolin-impregnated hemostatic dressing reduce perioperative blood loss in elective laparoscopic colorectal surgery?

KEYWORDS

Hemostasis;
Surgery;
Gauze

Dear Editor,

We have recently conducted a retrospective study on the whether the routine use of kaolin-impregnated gauze (QuikClot®) during elective laparoscopic colorectal surgery might result in less blood loss and consequently less bleeding through the Jackson–Pratt (JP) drain.

We retrospectively analyzed two hundred patients who used regular gauze and QuikClot® groups to evaluate the type of bleeding and time to hemostasis. Hemoglobin and hematocrit were evaluated immediately and 3 days after surgery.

A total of 200 patients were analyzed for this study: 100 patients in the regular gauze control group and 100 patients in the QuikClot® treatment group. Demographically, the

regular gauze and QuikClot® groups were similar. The area of bleeding was covered with dry gauze or QuikClot® with pressure applied (Fig. 1). There were no differences in the mean age, weight, type of surgery, and type of bleeding between the two groups (Supplementary Table 1) ($P > 0.05$). There was no significant correlation between the bleeding size, type of bleeding ($P = 0.773, 0.431$, respectively) (Supplementary Table 1). The mean time to hemostasis was similar in both groups (3.5 min vs. 4.4 min; $P = 0.584$) (Supplementary Table 2). QuikClot® application was not associated with a significantly shorter time to hemostasis compared with the regular gauze treatment.

No significant differences were identified in the type of bleeding or the time to hemostasis between the two types of gauze ($P = 0.341$) (Supplementary Fig. 2).



Figure 1 Application of QuikClot® during laparoscopic anterior resection.

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No differences were observed for in the Jackson–Pratt drain hemoglobin and hematocrit levels between the two groups immediately after surgery ($P = 0.341$) (Supplementary Table 3). There were no serious adverse events reported in either group during the study.

There was no significant correlation between the wound size and the type of gauze used ($P = 0.773$). The mean time to hemostasis was similar in both groups (3.5 min vs. 4.4 min; $P = 0.584$). There were no differences in the Jackson–Pratt drain hemoglobin and hematocrit levels when evaluated immediately and 3 days after surgery ($P = 0.341$ and 0.412 respectively).

This study demonstrated no difference in the time to hemostasis with the use of QuikClot® as compared with regular gauze during elective laparoscopic colorectal surgery. Regular gauze performed perfectly well with similar outcomes in terms of wound size and the type of bleeding. Kaolin-impregnated gauze for hemostasis in elective colon surgery showed limited benefits.

Conflict of interest

All of the listed authors claim no conflict of interest.

Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.asjsur.2019.02.013>.

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