Dental Extraction in Haemophilia Using Fibrin Seal for Local Haemostasis

G.		Giamarellos
C.		Louizou
Th.		Rosemberg
T.		Mandalaki

Besides replacement therapy, local measures are very important in controlling haemorrhage following tooth extractions in haemophilia. Appropriate local haemostasis could decrease to minimal levels the quantity of transfused factor VIII or IX. During the past year (1979–1980), in our Haemophilia Treatment Centre of Athens, lyophilized human fibrin seal (Immuo) for lining alveoli after tooth extraction, was used for local haemostasis. Collagenous fleece (Pentapharm, Basel) is also used, cut to a size analogous to the vacant socket and thoroughly wetted with the requested quantity of fibrin seal. The socket is packed with the adhesive and thrombin solution and applied onto the wound surface. With this method, dental extractions were carried out in 16 patients in 10 sessions. Only pre-operative infusion of factor VIII or factor IX preparations was administered. We had excellent results in 27 out of 33 interventions no post-extraction haemorrhage

and a normal total healing occurred within 8 days. 2 of the subjects showed slight oozing without specific problems and only 4 cases showed a greater haemorrhage and needed supplementary infusion of factor VIII or factor IX after the extraction. The results of this method of local haemostasis are compared with the previously applied method of application of acrylic splints in relation with the comfort of the patient the speed of healing of the wound and the economy in F VIII or F IX post-extractively.