Azienda Ospedaliera
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Turin, 04.07.2013

S.S.C.V.D. Breast Surgery
Director: Dr. Riccardo Bussone
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Surgery Department: (Dir. Prof. P. Mioli)

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At the S.S.C.V.D. Breast Surgery Department directed by Dr. Bussone, in the period between February 2012 and May 2013, 40 female patients, operated for breast cancer, were treated with SEALFOAM™.
Of these 40 patients:
- 20 were subjected to underarm dissection and
- 20 breast conserving surgery

All patients were submitted to general anesthesia and in all cases a suction drainage was positioned.
These patients were compared to other 40 patients submitted to the same surgical intervention and not treated with any pro-coagulant device.

The following parameters were analyzed:
- Post-operative bleeding
- Time the drainage was in place in terms of days
- Amount of liquid collected in the drainage within the first 24 hours

The collected data showed that in patients in which SealFoam™ was positioned there was no cases that reported post-operative bleeding.

The mean time of the drainage for patients treated with SealFoam™ was 5 days for patients submitted to underarm dissection and 4 days for patients submitted to breast conserving surgery with a reduction in both cases of 26% in terms of time compared with control patients. This is important to us as it in turn reduces the length of stay in hospital, which is a good cost saving result.

The collection drained in 24 hours after surgery or intervention was less than 50 ml in patients submitted to breast conserving surgery and less than 80 ml for patients treated at underarm level with a reduction of about 30% in both categories vs. the control group, again a significant comparison through the use of Seal Foam™.

All 40 patients were discharged on the first day.

The manufacturer provided to our department n. 20 SealFoam™ code PF 642 and n. 20 SealFoam™ code PD 644 for which it was possible to detect a greater consistency and easy handling of code PD 644 compared to the code PF 642.

We certainly in view of the above results and experience in using Seal Foam™ endorse its use entirely. Seal Foam™ is a ready to use Polysaccharide Foam that displays a great affinity to adhering to human tissue and has a very good capacity to soak up excess fluid and/or blood at the surgical site.

We find the pricing of Seal Foam™ makes it as well an interesting Hemostat compared with equal products but at higher costs to the hospital.

Responsible
Dr. R. Bussone