Study of Comparison between Skin Sutures and Skin Staplers: 200 Studies

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Abstract: Background: There are various ways the skin approximation whether be it sutures, staplers, glues, sterile tapes all of these have the same purpose of but the one which provides the best scar with least wound infection and consumes least time is the one that should be used. So here we have studied 200 patients over a period of 10 months comparing skin sutures with staplers and their outcome with respect to time consumed and percentage of complication. Methods: A prospective type of study was conducted from October 2016 to July 2017 at Meenakshi Medical College & Hospital-Enathur, Kanchipuram for comparison between skin sutures and skin staplers in terms of effectiveness and complications in 200 patients who underwent various surgical procedures. The patients included in this study were randomly selected from those who underwent various surgical procedures which were either elective or emergency with various incisions. Results: The average time taken for skin closure by staplers is 1.84 min per 10 cm of wound & for skin sutures, it is 6.61 min per 10 cm of wound and complication rate for suturing is 30% & for staplers it is about 12%. Conclusion: Outcome of staplers is cosmetically superior to skin sutures with overall less complication as compared to skin sutures.

Keywords: Suturing, Staples, Skin suture, Sutures

1. Introduction

Accurate tissue approximation is essential for operative repair of defects and execution of defects and execution of safe healing process. Aside from gentle handling of tissues and careful dissection, the approximation must be achieved without tension and without compromising the integrity of the blood supply which is essential for healing process. The perfectness of tissue approximation and type of approximation influences the tissue healing rate, post operative early and late complication of surgical wound and economical burden of the hospital. Through the ages man sought for methods of binding wounds to promote healing. In olden days spider webs, warrior ants etc were used till suture materials were discovered. In this modern era broadly speaking the materials or gadgets for approximation of tissues are the sutures, staples or clips, glues, steril tapes etc., the secret to achieve a good wound healing lies in meticulous tissue dissection selection of suture material, methods of wound closure and post operative complications. The key principles involved to achieve perfect healing are preservation of blood supply, minimal tissue damage, approximation of edges without tension, correct suture spacing and suture bites with proper selection of suture materials.

In conclusion the surgical technique is far more important than the sutures used but a good scientific knowledge of different sutures and needles and how they perform, will aid the surgeon to achieve optimum wound healing. Since suture technology has kept in pace with advances in surgical techniques, it is imperative on the part of the surgeon not only to be fully aware of them but also to keep them in their surgical armamentarium. Skin staplers are far better for skin closure in terms of effectiveness, cost and in terms of compliance and complications.

This study is conducted for comparison of skin closure by using skin sutures and skin staplers with respect to effectiveness and complications.

2. Aim of Study

To study the outcome of wound closure by skin sutures and skin staplers in terms of effectiveness and complications – a comparison study.

3. Methods and Materials

This is a prospective type of comparison study conducted from May 2016 to October 2017 at Meenakshi Medical College-Kanchipuram includes 200 patients who underwent various surgical procedures.

The patients included in this study were randomly selected from those who underwent various surgical procedures including.

- Elective
- Emergency procedures with various incisions

The relevant data of patients included in the study were collected and recorded as follows. Age of the patient, sex, occupation, type of incision, length of incision, gadget used for skin closure, time taken for skin closure, post operative complications namely wound infection, seroma formation, stitch abscess, stitch granuloma, wound gaping and adverse scars were observed for and recorded in the Proforma.

The post operative day of suture removal was also observed. The final out come of the scar whether good, fair or ugly was observed in the follow up period and recorded in the Proforma.
Skin closure was done by using suture materials namely silk, Prolene, nylon etc., and compared with staplers and the outcome were observed and recorded. The methods used for skin closure with suture materials were simple, mattress and subcuticular sutures using various suture materials which are chosen based on the availability of suture materials in the operation theatre.

4. Observation

This study included total of 200 cases that underwent various surgical procedures at various site, various type of incision from the period of October 2017 to July 2018. Out of these 200 cases 100 cases underwent skin closure by sutures and 100 patients underwent skin closure by skin staplers.

Table showing % distribution of site of wounds

<table>
<thead>
<tr>
<th>S No</th>
<th>Site of wound</th>
<th>No. of patients</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Head and neck</td>
<td>40</td>
<td>20%</td>
</tr>
<tr>
<td>2.</td>
<td>Thorax</td>
<td>40</td>
<td>20%</td>
</tr>
<tr>
<td>3.</td>
<td>Abdomen and groin</td>
<td>80</td>
<td>40%</td>
</tr>
<tr>
<td>4.</td>
<td>Upper and lower limbs</td>
<td>40</td>
<td>20%</td>
</tr>
</tbody>
</table>

The methods adopted for skin closure was chosen randomly in this study revealed that suture materials were used in 100 patients and staplers in 100 patients.

Gadgets for Skin Closure

<table>
<thead>
<tr>
<th>S No</th>
<th>Gadget used</th>
<th>No. of patients</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Suture</td>
<td>100</td>
<td>50%</td>
</tr>
<tr>
<td>2.</td>
<td>Stapler</td>
<td>100</td>
<td>50%</td>
</tr>
</tbody>
</table>

Outcome for Skin Sutures

<table>
<thead>
<tr>
<th>Site of the wound</th>
<th>Average length of wound</th>
<th>Type of suturing</th>
<th>Average speed of closure – minutes / 10cm wound</th>
<th>Materials used</th>
<th>% of complications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head and neck</td>
<td>7.3cm</td>
<td>Simple (for face) &amp; vertical mattress (for scalp) &amp; subcuticular (for neck)</td>
<td>8.04</td>
<td>Prolene for face and neck and silk for scalp.</td>
<td>6.</td>
</tr>
<tr>
<td>Chest wall</td>
<td>9.05cm</td>
<td>Vertical mattress.</td>
<td>3.5</td>
<td>Silk.</td>
<td>6.</td>
</tr>
<tr>
<td>Abdomen and groin</td>
<td>12.9cm</td>
<td>Vertical mattress.</td>
<td>8.52</td>
<td>Silk.</td>
<td>14.</td>
</tr>
<tr>
<td>Upper and lower limb</td>
<td>10.3cm</td>
<td>Vertical mattress.</td>
<td>6.23</td>
<td>Silk.</td>
<td>4.</td>
</tr>
</tbody>
</table>

Complications studied are wound gaping, wound infection, seroma formation, tissue reaction around the suture material, suture line necrosis, stitch abscess, granuloma and ugly scars.

Average length of wound and time of closure is nothing but the arithmetic mean obtained from the master chart.

Calculation

- Length of each wound and its time taken for closure using skin sutures is calibrated for length of 10cm.
- Thus the average time taken for closing 10cm wound with skin sutures is \[\frac{\sum x}{n} = 6.61\] minutes (please refer to master chart for data).

Bar chart showing the % distribution of complication rates among wounds closed with skin sutures

Outcome for Staplers

<table>
<thead>
<tr>
<th>Site of wound</th>
<th>Average length of wound</th>
<th>Materials used</th>
<th>Average speed of closure in - minutes/10cm wound</th>
<th>% of complications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head and neck</td>
<td>7.52cm</td>
<td>Staplers.</td>
<td>1.74</td>
<td>1.</td>
</tr>
<tr>
<td>Chest wall</td>
<td>8.5cm</td>
<td>Staplers.</td>
<td>2.43</td>
<td>3.</td>
</tr>
<tr>
<td>Abdomen and groin</td>
<td>9.95cm</td>
<td>Staplers.</td>
<td>1.65</td>
<td>6.</td>
</tr>
<tr>
<td>Upper and lower limbs</td>
<td>10.9cm</td>
<td>Staplers.</td>
<td>1.54</td>
<td>2.</td>
</tr>
</tbody>
</table>
Bar diagram showing % distribution of complication rates with skin staplers with respect to various sites:

Complications studied are wound gaping, wound infection, seroma formation, tissue reaction around the suture material, suture line necrosis, stitch abscess, granuloma and ugly scars.

Average length of wound and time of closure is nothing but the arithmetic mean obtained from the master chart.

**Calculation**
- Length of each wound and its time taken for closure by using is calibrated for length of 10 cm.
- Thus the average time taken for closing 10 cm wound with skin staples = \[\sum x/n = 1.84 \text{ minutes} \] (please refer master chart for data).

Comparison between Sutures and Staplers:

Percentage distribution of complications for sutures versus staplers

<p>| No. of complications &amp; No. of patients with complications &amp; No. of patients without complications &amp; Complication rate |
|----------------------|--------------------------|--------------------------|--------------------|</p>
<table>
<thead>
<tr>
<th>S No.</th>
<th>Sutures</th>
<th>Staplers</th>
<th>Total</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>30</td>
<td>12</td>
<td>42</td>
<td>30%</td>
</tr>
<tr>
<td>2</td>
<td>70</td>
<td>88</td>
<td>158</td>
<td>12%</td>
</tr>
</tbody>
</table>

By using the formula \[\sum (O-E)^2/E\] the Chi-square value \(X^2\) is calculated as 9.76.

The degree of freedom for the above table is calculated by using the formula \((\text{Column}-1) \times (\text{Row}-1)\) and the value is 1.

From probability distribution table the P value for the obtained values is as follows:

The value of Chi square for a probability of 0.05 is 3.84 which is less than the calculated value. Also the value of Chi square for a probability of 0.005 is 7.88 which is less than calculated value.

But, for the probability of 0.001 the Chi square value is 10.83 which is more than the actual value.

**5. Discussion**

1) A study conducted by Kanegaye et al – 1997, USA– studied 88 patients from 13 months to 16 yrs, attending the emergency department with scalp lacerations. Staples cost 39% less than per wound closure & the complications reported were none. Stapling was fast than suturing per wound.

- A study conducted by Ritchie AJ & Roke LG -1989, Northern Ireland -studied 200 cases with lacerated wound in scalp. Average speed of repair for staplers is 49 seconds and for skin sutures is 6 min & 20 sec. Wound repair by staples is less painful than with skin sutures. There were no significant difference in cost & complications.

2) A study Brickman KR & Lambert RW in 1989 – USA – studied 76 patients with lacerations in scalp, trunk & extremities. Average time taken for staplers is 30 sec. one scalp wound & one leg wound dehisced. Staplers were cost effective than sutures & compliance of was good.

- A study by MacGregor FB et al in 1989, Scottland -100 patients with lacerated wounds. Mean time for stapler repair is 18.6 sec & for suture is 124 sec. The cost of repair and the complication rate were almost same. Patient compliance with stapler is good than sutures & no local anesthesia applied for stapling.

3) A study by Orlinsky M et al in 1995, USA – studied patients presenting in emergency department with lacerations of scalp, trunk and extremities. The average speed of stapling is 8.3 seconds per cm wound for staplers & 63.2 seconds per cm wound for sutures. The cost of wound repair per wound was significantly higher in skin sutures than staplers.

- In this study the average time taken for skin closure by staplers is 1.84 min per 10 cm of wound & for skin sutures, it is 6.61 min per 10 cm of wound. Complication rates for suturing is 30% & for staplers, it is about 12%.

**6. Conclusion**

1) From the P value it is concluded that staplers are effective in terms of lower incidence of complication rate at the probability of 0.005.

2) Staplers consume less time when compared to skin sutures particularly in major cases and in emergency which can reduce the duration of anesthesia.

3) Since staplers by reducing the complication rate it is cost
effective.
4) Compliance for surgeon and patient is also good for
staplers.
5) Apart from gadgets that are used in wound closure there
are other significant factors that contribute to over all
complication rates that is 21% in this study (that is 6% for
skin staplers and 15% for skin sutures).
6) Outcome of staplers is cosmetically superior to skin
sutures.

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