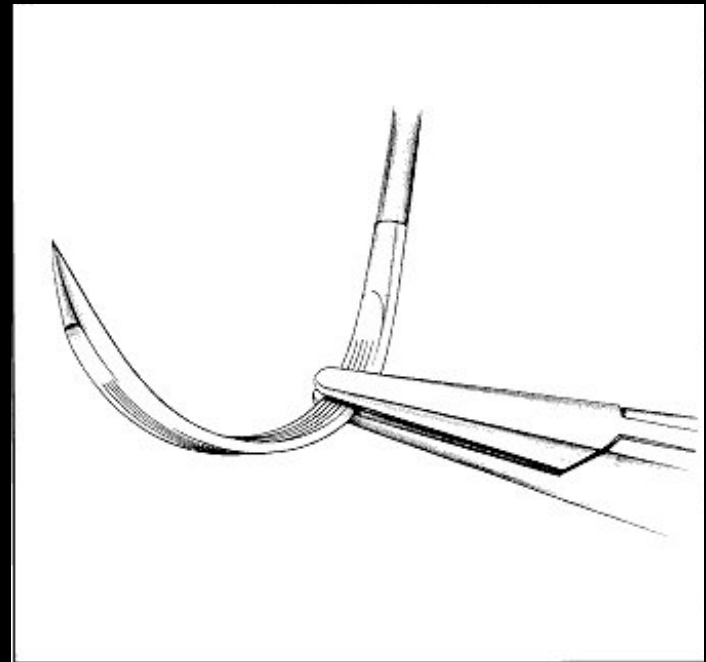


# SUTURED GI ANASTOMOSES

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R Sim

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# Principles of Suture Selection (1)

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- When a wound reaches max. strength, sutures are no longer needed.

Slow-healing tissues (skin, fascia) - non or slowly absorbable

Fast-healing tissues (GI, bladder) - absorbable

# Principles of Suture Selection (2)

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- Regarding suture size

Use finest size commensurate with natural tissue strength

# Principles of Suture Selection (3)

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- FB in contaminated tissues may convert to infection.

Avoid multifilament

Use monofilament or absorbable

# Principles of Suture Selection (4)

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- FB in fluids of high crystalloid conc. may precipitate stones.

Use smallest inert absorbable monofilament in urinary and biliary tracts

# Needle-holder

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- Correct size match to suture/needle
- Removing thumb from ring allows improved axis of rotation
- Hold needle 2/3 from the point
- Place and pass needle once only
- Release needle when holder is stopped by tissue

# Techniques

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- Sutured or stapled
- Single or double layer
- Continuous or interrupted
- Full thickness, seromuscular or submucosal
- Inverted or everted
- End-end, side-side or end-side
- Others- leak test, omental wrap, tissue glue, drains

# Factors affecting anas. healing

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## Favourable

Good vascularity

No tension

Healthy bowel ends

Free distal flow

No abscess

## Unfavourable

Poor vascularity

Under tension

Diseased bowel ends

Distal obstruction

Associated abscess



# Common Errors

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- Error in judgement
- Poor handling
- Suture-line defect
- Everted anastomosis
- Poor hemostasis
- Poor drain placement
- Mesenteric vascular injury
- Strangulating sutures
- Intestine caught in fascia closure

# Suturing patterns(1)

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- Enter perpendicular
- Distance b/w stitches equal to width of each stitch
- Tie 'loosely' to allow for edema
- Tight continuous suture can pursestring and constrict
- Continuous locking suture prevents slippage and bleeding but may strangulate
- Vertical mattress - precise edge approximation
- Horizontal mattress - eversion

# Suturing patterns(2)

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- Connell stitch - continuous inverting suture commonly used for inner anterior layer of bowel anas.
- Lembert stitch - continuous or interrupted outer layer inverting suture
- Halsted stitch - interrupted seromuscular horizontal mattress
- Cushing stitch - continuous seromuscular horizontal mattress