

## Comparison of Multifilament with Monofilament Sutures for Closure of Inferior Abdominal Full Thickness Skin Graft Donor = Perbandingan benang multifilamen dengan monofilamen untuk penjahitan donor tandur kulit pada Inferior Abdomen

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### Abstrak

<p>Latar Belakang : Terdapat perdebatan jangka panjang di antara dokter bedah plastik mengenai bahan benang yang ideal untuk penjahitan luka. Banyak dokter bedah berpendapat bahwa material monofilamen lebih baik dibandingkan dengan monofilamen karena lebih mudah dalam melakukan simpul, tidak mudah terbuka, dan menimbulkan reaksi radang yang minimal. Pendapat lain tidak keberatan dengan benang multifilamen dan menganggap hasil yang diberikan tidak lebih buruk dibandingkan dengan monofilamen. Pasien dan Metode : Defek sekunder donor tandur kulit full-thickness di area inferior abdomen dijahit menggunakan Vicryl 4.0 untuk lapisan dalam, dan pada lapisan luar dibagi menjadi grup Vicryl 4.0 dan grup Nylon 4.0. Seluruh pasien dilakukan follow-up hingga enam bulan setelah tindakan operasi dan diukur nilai VAS masing-masing pasien terhadap bekas luka jahitan. Hasil : Terdapat total 20 pasien disertakan dalam penelitian ini. Setelah 6 bulan pasca operasi, skor VAS pada grup pasien multifilamen memiliki nilai rerata 6.8, sedangkan pada grup monofilamen nilai rerata 7. Komplikasi berupa infeksi, dehisens, dan peradangan ditemukan pada satu pasien dari setiap grup. Kesimpulan : Tidak didapatkan perbedaan signifikan antara bekas luka yang dihasilkan dan komplikasi yang terjadi pada luka yang dijahit menggunakan benang multifilamen dengan monofilamen.</p><hr /><p>Background : There is long-standing disagreement among plastic surgeons as to the ideal suture material for closing skin wounds. Many surgeons believe that monofilament suture material is preferable, as it is easier to tie, is unlikely to break prematurely, and elicits a minimal inflammatory response. Others feel that these issues are of minor importance and prefer absorbable multifilament sutures because they do not have to be removed, thus saving the surgeon time and decreasing patient anxiety and discomfort. Patients and Methods: Full thickness skin graft were taken from inferior abdominal. All deep tissues were closed with 4.0 Vicryl, while on the subcuticular level one group was sutured using 4.0 Vicryl and the other with 4.0 Nylon. All patients were followed for up to 6 months after surgery and VAS score of the scar were recorded from each patient. Result : Twenty patients were included in this study and divided into two groups. After 6 months evaluation, the mean VAS score for the aesthetic perception of the scar from the multifilament suture group was 6.8 and from the monofilament group was 7. Infection, dehiscence, and inflammation were found on one patient from the multifilament group and hypertrophic scar on one patient from each group. Conclusion : There are no significant difference on scar formation and complication between FTSG donor defects that were sutured using multifilament and monofilament suture.</p>