



CASE STUDY

A PRACTICAL METHOD FOR PRE-OPERATIVE MARKING: THE KNOT METHOD

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ABSTRACT

Accurate pre-operative marking of important reference points should be undertaken to avoid distortion when placing sutures on the post-excision residual tissues after procedures such as abdomino-plasty and belt lipectomy performed to correct the excessive skin lagging after bariatric surgery.

INTRODUCTION

A good pre-operative planning is a major determinant of the outcome of surgery. Surface markings represent an integral part of surgery for achieving optimal cosmetic results and symmetrical appearance (Kayadibi, 2012). In particular, accurate pre-operative marking of important reference points should be undertaken to avoid distortion when placing sutures on the post-excision residual tissues after procedures such as abdomino-plasty and belt lipectomy performed to correct the excessive skin lagging after bariatric surgery (Fahmy, 2006). In the majority of the cases, surgical pens or artificial dyes are utilized for drawing surgical markings, although they may be easily erased when the surgical field is cleansed using disinfectant solutions (Figure 1a). Therefore, frequent repetition of the marker dyes or marking of the skin through the use of surgical scalpel are recommended as additional modalities to avoid the disappearance of these markings. Of these approaches, the former poses certain practical challenges, while the latter is associated with several risks including the formation of hypertrophic scars and keloid formation (Tatla, 2001). Although drawing skin lines using surgical scalpels on areas to be excised does not pose any risks, drawings made by scalpels on pre-defined reference points for proper suturing of residual tissues after excision is linked with the risk of scar and keloid formation, as stated above. Therefore, we placed

surgical knots using 5/0 silk suture material without excessive tightening located at a distance of 1 cm from the reference points, on which the first sutures would be placed after the excision in patients undergoing belt lipectomy. Following the completion of excision, the initial suture was placed on these suture points, in order to provide a smoother approximation of opposing proximal and distal tissue edges (Figure 1b-c). In procedures such as belt lipectomy with a predisposition for bleeding, a good planning for the tissue to be excised as well as the pre-operative determination of the reference points for the placement of initial sutures carry great significance for good cosmetic results and symmetric appearance.



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Figure 1a, b, c. Following the completion of excision, the initial suture was placed on these suture points, in order to provide a smoother approximation of opposing proximal and distal tissue edges

Therefore, we believe that placement of suture markings in the form of surgical knots on reference points, which are usually marked using dyes prone to the risk of being erased, appears to be an effective, simple, and reliable method for surgical marking.

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