

A rare complication of intraoperative cell salvage – A Case Report

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INTRODUCTION

The use of cell salvage is one of blood conservation during major surgery. For example scoliosis corrective surgery, the expected amount of blood loss is extensive, thus this procedure is beneficial. However, there are rare complications of patient developing transient hematuria. Thus, we are reporting a case of corrective scoliosis surgery developing transient hematuria post cell salvage.

REPORT:

A case of a 16 years old girl with severe adolescent idiopathic scoliosis (AIS) Lenke II AN (Figure. 1) had undergone corrective scoliosis surgery. Intraoperatively, blood loss was 1.8 litres, thus cell saver was used with a total of 633ml filtered blood managed to transfuse back to patient. Plus, 753ml of packed red cell was also transfused.

The 5 hours surgery was uneventful. Immediately postoperative, we noted gross hematuria the urine bag.

Disseminated intravascular coagulation (DIC) screening and renal profile were taken and results were unremarkable. Urine sample was showed blood in urine. Due to this, a total of 711ml of fresh frozen plasma was transfused. Urine was clear after 24 hours of surgery.

DISCUSSION:

Hematuria associated with cell salvage cases was reported in small incidence in United States by Keverline in October 1998. Though all the cases were transitory, it was recommended to use with caution as it may lead to complications such as hemolysis associated transfusion conditions. As the result of rupture of the red blood cells and leakage of their contents, patient may develop other detrimental condition

postoperatively, such as acute kidney injury and DIC.

CONCLUSION:

Cells saver is a life saver procedure. However, it can be vice versa. The surgery might went well without any hindrance, but patient may develop complications post operatively.



Figure 1 : plain radiograph showed cobb angle 90 degree

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