An approach for cutting interrupted buried dermal sutures

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Abbreviation used: SCS: suture cutting scissor

CHALLENGE
Reconstructing surgical defects often requires various suturing techniques. Buried dermal sutures are commonly utilized for wound closures, achieving superior aesthetic outcomes and a low risk of wound infection. Suture tail length, the length of the suture beyond the knot, is an important factor in ensuring satisfactory wound healing. Excessively long suture tails can protrude through the skin and predispose to wound infections. If cut too short, the knot could be cut or unravel, decreasing surgical efficiency and efficacy. Furthermore, using tissue scissors to cut sutures results in dulling and decreased life of tissue scissors.

SOLUTION
In this video tutorial (Video 1, available at www.jaad.org), we demonstrate a proper technique for cutting interrupted buried dermal sutures, reliably achieving the appropriate tail length. This technique is geared toward right-handed surgeons, but can be used for left-handed surgeons by reversing the direction in which the suture cutting scissors (SCSs) are rotated.

1. Place index finger on the fulcrum of the SCS to optimize control of the scissor tips.
2. Once the suture knot has been tied, the suture tails are pulled taut in an upward manner, with the most distal aspect of the SCS tips placed directly on top of the knot.
3. Rotate the SCS clockwise 90° along the axis of the incision so that the thin edge of the SCS falls slightly into the wound (Fig 1).
4. Cut the suture at this angle, using the most distal aspect of the scissor tips, leaving the knot intact with minimal suture tail.

This reproducible method achieves consistent secure subcutaneous suture tail lengths, providing knot security, good cosmetic results, and may reduce infection risk.
Conflicts of interest
None disclosed.

REFERENCES

Fig 1. Steps 2 and 3 of cutting buried dermal sutures. The suture tails are pulled upward while the suture scissors are placed along the line of the incision with the tips directly on top of the knot. Scissors are rotated clockwise so that the thin edge of the scissors fall into the wound. They are rotated counterclockwise for left-handed surgeons.