Cross mattress

6-Cruciate suture (Cross mattress): -

In this type of suture, the needle is inserted 1 cm from the edge of the wound on the right side and passes to the left side and drawn 1 cm form the wound edge, then, the needle is inserted 1 cm below the 1st bite on the right side and 1 cm from the skin edge, and passes through the wound to the left side and drawn 1 cm ventral to the 2nd bite on the left side and 1 cm lateral to the wound.

7-Near-far-far-near suture: -

This type is a mixture of cross mattress and vertical mattress sutures. The needle is inserted 0.75 cm from the wound edge on right side and drawn 1.5 cm from the left side with 0.5 cm higher level, then the needle passes to the right side in the same level, and inserted 1.5 cm far from the wound edge, then drawn 0.75 cm from the wound edge (on the left side) at 0.5 cm lower level. Finally, two silk lines can be seen perpendicular on the wound, the upper long one is about 0.5 cm higher in level than the lower short line.

Advantages: -

It is a good tension suture.

Disadvantages: -

It is a time consuming suture.

8-Subcuticular suture: -

This type of suture is used to avoid the small scars produced around suture holes in other patterns. The needle is inserted into the subcutaneous tissue in the apex of the wound and passes to the other side and a knots is tied subcutaneously, then the suture is advanced like continuous horizontal mattress, but the needle is inserted in one side and drawn at lower level in the same side, the advanced to the other side and inserted then drawn at lower level till the end of the wound. No suture materials can be seen after suturing of the wound and the knots should be subcutaneous.

B-Suture patterns for hollow organs: -

Theses patterns are either opposing or inverting patterns and can be applied in as single or double rows. Single row patterns have high incidence of leakage, dehiscence, adhesion and peritonitis, while double row patterns associated with high incidence of stenosis. Whither single row or double row is the best, stills questionable.
1-Lembert suture: -

This pattern can be used in an interrupted or continuous manner. The needle passes through the serosa, muscularis and submucosa but it doesn't involve the mucosa. The needle is inserted perpendicular on the wound 0.8 cm from the wound edge and passes the mentioned layers then it is drawn 0.4 cm from the wound edge in the same side, then it passes to the other side and inserted 0.4 cm and drawn 0.8 cm from the wound edges. Only one line of the suture material can be seen perpendicular on the wound.

Advantages: -

It is the simplest pattern for the internal organs, relatively rapidly performed, inverts lips of the wound, and never involves the mucosa so the possibility of contamination is low.

Disadvantages: -

It produces slight stenosis of the bowel.

2-Halsted suture (interrupted Quilt): -

It is a modification of Lembert pattern. The needle is inserted perpendicular on the wound 0.8 cm from the wound edge of the right side and drawn 0.4 cm from the edge in the same side, then it passes to the left side (in the same level) then it penetrates 0.4 cm from the wound edge and drawn 0.8 cm from the edge. At the left side and with a lower level (0.4 cm) the needle is inserted 0.8 cm from the edge and drawn 0.4 cm, then it passes to the right side and inserted 0.4 cm from the edge and drawn 0.8 cm. Two lines of suture material can be seen parallel to the wound (one on each side).