If a small vein caliber prevents positioning the catheter in the arm, the following step is to position the same catheter in the supraclavicular area, which can be defined as an off-label use or “atypical” approach, first described by Pittiruti Bernasconi et al (2017).

Abstract:

INTRODUCTION: The peripherally inserted central catheters (PICCs) are vascular access devices (VAD) that are increasingly being used in the pediatric population. If a small vein caliber prevents positioning the catheter in the arm, the following step is to position the same catheter in the supraclavicular area, which can be defined as an off-label use or “atypical” approach, first described by Pittiruti.

MATERIALS AND METHODS: We retrospectively reviewed PICC positioning with puncture-site in the supra-clavicular area (“atypical” PICC insertion) and then tunneled on the chest.

RESULTS: Nineteen atypical PICCs were positioned in 18 patients. The median age of patients at the day of implant was 14 months (IQR 3-27 months), and weight 7.5 kg (IQR 4-12 kg).
Within this population, 74% of cases scheduled for a typical PICC insertion presented vein caliber too small for this procedure. For this reason, the typical PICC insertion was changed in favor of an atypical PICC procedure. Atypical PICCs were successfully used in 100% of cases without immediate complications.

CONCLUSIONS: Atypical PICC positioning is a safe and useful alternative to the conventional technique when there is need for a central vascular access device (CVAD) for mid- or long-term therapy.

Reference:


Thank you to our partners for supporting IVTEAM