

“We report a challenging case of a stuck tunnelled haemodialysis catheter, which required sternotomy with cardio-pulmonary bypass for retrieval” Jafferbhoy et al (2015).

Reference:

Jafferbhoy, S.F., Asquith, J.R., Jeeji, R., Levine, A., Menon, M. and Pherwani, A.D. (2015) A stuck haemodialysis central venous catheter: not quite open and shut! Journal of Surgical Case Reports. April 5th.

Challenging case of a stuck tunnelled haemodialysis catheter [@ivteam](http://ctt.ec/KeF9Q+) #ivteam

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Abstract:

Removal of tunnelled central venous catheters can become complex if left in situ for a prolonged period. We report a challenging case of a stuck tunnelled haemodialysis catheter, which required sternotomy with cardio-pulmonary bypass for retrieval. A 47-year-old female had failed attempts to remove the venous limb of a Tessio line on the ward. A cut down on the internal jugular vein and division of the fibrin sheath failed to release it. Synchronous traction was applied via a snare inserted through a femoral approach. On table trans-oesophageal echocardiogram showed the tip of the catheter traversing the tricuspid valve. At sternotomy with cardio-pulmonary bypass, the tip of the catheter was found attached to the septal leaflet of the tricuspid valve requiring release and repair. The management of stuck line has potential serious complications. Prophylactic catheter exchange should be considered to avoid complications.

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