The authors did not consider ‘leak’ from the insertion site as potential thrombosis development, which is an early precursor of thrombus formation and compromised venous outflow, which has been clearly documented in literature over the last decade” Spencer and Bardin (2016).

Extract:

“We recently read the article ‘Safe administration of vancomycin through a novel midline catheter: a randomized, prospective clinical trial’ by Caparas and Hu (1), which raised a number of concerns in this limited-sized patient sample study (n = 54), which we would like to address.

The authors did not consider ‘leak’ from the insertion site as potential thrombosis development, which is an early precursor of thrombus formation and compromised venous outflow, which has been clearly documented in literature over the last decade. It could also be due to advanced fibrin sheath development around the catheter body and lumen tip, allowing retrograde flow of an infused solution (irritant or not). The above clinical situations can be caused by both chemical (medication) and mechanical (physical) processes occurring within the vessel.

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The paper stated if vancomycin therapy was extended beyond 5 days, physicians were advised to administer subsequent doses via a peripherally inserted central catheter (PICC) – so patients were subjected to a secondary device insertion and these numbers were not documented" Spencer and Bardin (2016).

Full Text
Reference:

Spencer, T.R. and Bardin, A.J. (2016) Comment on: Safe administration of vancomycin through a novel midline catheter: a randomized, prospective clinical trial. The Journal of Vascular access. 17(4), p.293 – 372, e65 – e141.

DOI:10.5301/jva.5000564

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