

In this study, we demonstrated that PICC placement significantly increases the likelihood of DVT/PE in liver transplant recipients” Yip et al (2016).

Abstract:

Deep vein thrombosis (DVT) and pulmonary embolism (PE) are surgical complications estimated to occur in 5% to 10% of patients. There are limited data regarding DVT/PE in the early postoperative period in liver transplant patients. The aim of this study is to determine risk factors that influence the incidence of DVT/PE and the effectiveness of prophylaxis.

METHODS: We reviewed the records of 999 patients who underwent initial liver transplant between January 2000 and June 2012 at Henry Ford Hospital. In 2011, a standardized prophylactic regimen using subcutaneous (SQ) heparin was initiated. All patients that developed either upper/lower extremity DVT or PE within the first 30 days of transplant formed the cohort of this study.

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RESULTS: On multivariate analysis, only peripherally inserted central catheter (PICC) placement and SQ heparin were associated with DVT/PE. In patients receiving heparin, 3 (1.0%) had DVT/PE versus 25 (3.5%) who did not receive heparin ($P = 0.03$). Sixteen (6.9%) patients that had a PICC developed DVT/PE compared with 12 (1.6%) patients without a PICC ($P < 0.001$). In the heparin group, DVT/PE with PICC was reduced to 3 (3.0%) versus 13 (9.9%) in those with a PICC and did not receive heparin ($P = 0.03$). Mean time from transplant to DVT/PE diagnosis was 12.3 days. Length of hospitalization was significantly longer in patients who developed DVT/PE (18.5 vs 10.0 days, $P < 0.001$).

CONCLUSIONS: In this study, we demonstrated that PICC placement significantly increases the likelihood of DVT/PE in liver transplant recipients. Prophylactic SQ heparin effectively reduced DVT/PE events in this patient population.

Reference:



Does PICC placement increase upper extremity DVT rates in liver transplant recipients? | 2

Yip, J., Bruno, D.A., Burmeister, C., Kazimi, M., Yoshida, A., Abouljoud, M.S. and Schnickel, G.T. (2016) Deep Vein Thrombosis and Pulmonary Embolism in Liver Transplant Patients: Risks and Prevention. *Transplantation Direct*. 2(4), p.e68. eCollection 2016.

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