

In this research, we aimed to investigate the incidence rate of CVC-related venous thrombosis in senile patients and give a further discussion on the related risk factors and predictors” Liu et al (2015).

Reference:

Liu, G., Fu, Z.Q., Zhu, P. and Li, S.J. (2015) Central venous catheter-related thrombosis in senile male patients: New risk factors and predictors. Journal of Huazhong University of Science and Technology. 35(3), p.445-9.

Investigating central venous catheter-related thrombosis [@ivteam](http://ctt.ec/Z4Fa4+) #ivteam

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Abstract:

Central venous catheterization (CVC)-related venous thrombosis is a common but serious clinical complication, thus prevention and treatment on this problem should be extensively investigated. In this research, we aimed to investigate the incidence rate of CVC-related venous thrombosis in senile patients and give a further discussion on the related risk factors and predictors. A total of 324 hospitalized senile male patients subjected to CVC were selected. Retrospective investigation and analysis were conducted on age, underlying diseases, clinical medications, catheterization position and side, catheter retention time, and incidence of CVC-related venous thrombosis complications. Basic laboratory test results during catheterization and thrombogenesis were also collected and analyzed. Among the 324 patients, 20 cases (6.17%) of CVC-related venous thrombosis were diagnosed. The incidence rate of CVC-related venous thrombosis in subclavian vein catheterization was significantly lower than that in femoral vein catheterization ($P<0.01$) and that in internal jugular vein catheterization ($P<0.05$). No statistically significant difference was found between femoral vein catheterization and internal jugular vein catheterization ($P<0.05$). Previous venous thrombosis history ($P<0.01$), high lactate dehydrogenase level ($P<0.01$), low high-density lipoprotein (HDL) level ($P<0.05$), and low albumin level ($P<0.05$) were found as risk factors or predictors of CVC-related venous thrombosis in senile male patients. Subclavian vein catheterization was the most appropriate choice among senile patients to decrease the incidence of CVC-related venous thrombosis. Previous venous thrombosis history, high lactate dehydrogenase level, low HDL level, and low albumin level were important risk factors in predicting CVC-related venous thrombosis.