In sick neonates, however, risk factors may disrupt this equilibrium and lead to thrombosis. The most important risk factor is the central venous catheter” van Ommen and Sol (2016).

Abstract:

Neonatal hemostasis differs qualitatively, but in particular quantitatively, from hemostasis in older children and adults. Nevertheless, hemostasis in healthy neonates is functionally stable with no tendency to bleeding or thrombotic complications. In sick neonates, however, risk factors may disrupt this equilibrium and lead to thrombosis. The most important risk factor is the central venous catheter. Management of neonatal central venous catheter thrombosis is challenging, as no controlled trials have been performed. Therapeutic options include (1) observation and supportive treatment; (2) anticoagulant agents, including low-molecular-weight heparin and unfractionated heparin; (3) thrombolytic agents; and (4) thrombectomy. Prevention of thrombosis with anticoagulation is not advised yet. Careful consideration of the necessity of the catheter and optimal hygienic care are important preventative measures.

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