

Fibrinolysis is one of the methods extending the use of vascular access in patients with tunneled venous catheters thrombosis. The aim of this study was to assess one-year maintenance of tunneled catheters patency after first effective thrombolysis with urokinase and identify its predictors” Wójtowicz et al (2018).

Abstract:

INTRODUCTION: Fibrinolysis is one of the methods extending the use of vascular access in patients with tunneled venous catheters thrombosis. The aim of this study was to assess one-year maintenance of tunneled catheters patency after first effective thrombolysis with urokinase and identify its predictors.

METHODS: Retrospective analysis included 85 patients (age 69 ± 13 years) with permanent venous catheter thrombosis treated with urokinase at one center in the period 2010-2016. Urokinase was used (depending on weight) at a dose of 10,000 or 20,000 IU in an 8 h infusion to each catheter line. Assessment of one-year efficacy of fibrinolysis included the time between fibrinolysis and following thrombosis of the same catheter in patients that have previously obtained at least partial blood flow. The analysis included medication, comorbidities, catheter patency time and INR value during first thrombosis episode.

RESULTS: There were 62.4% patients with type-2 diabetes and 11.8% with neoplasm. The thrombolysis procedure was effective in 73 patients (85.9%). An analysis of the one-year efficacy of thrombolysis procedure included 73 patients. Among them, 23 experienced next episode of catheter-related thrombosis within a year postprocedure. Diabetes increased the risk for recurrent thrombosis .

CONCLUSIONS: Patients with diabetes are at higher risk of recurrent catheter-related thrombosis and therefore may require more aggressive anticoagulation therapy for its prevention.

Full Text

Reference:

Wójtowicz, D., Cholewa, D., Faba, A.M., Domańska, B., Kokoszka, J., Kopacz, K., Ficek, R., Irzyniec, T., Rotkegel, S.E. and Chudek, J. (2018) Diabetes decreases patency of tunneled catheters in hemodialysis patients after first effective thrombolysis with urokinase. *Renal Failure*. 40(1), p.384-389.

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