



Current practice in many countries is to increase the platelet count above a pre-specified level with platelet transfusions to prevent serious bleeding due to the procedure. However, the platelet count level recommended prior to central line insertion varies significantly from country to country” Estcourt et al (2015).

Extract:

“Patients with a low platelet count often require the insertion of central lines. Central lines are catheters whose tip usually lies in one of two main veins returning blood to the heart. They have a number of uses including: giving chemotherapy; intensive monitoring and treatment of critically-ill patients; giving nutrition into a vein (when the patient cannot eat); and when patients require long-term repeated treatments in to a vein. Current practice in many countries is to increase the platelet count above a pre-specified level with platelet transfusions to prevent serious bleeding due to the procedure.

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However, the platelet count level recommended prior to central line insertion varies significantly from country to country. This means that clinicians are uncertain about which is

the correct platelet count level, or if a platelet transfusion is required. The risk of bleeding after a central line insertion appears to be low if the clinician uses ultrasound to guide insertion of the line. Patients may, therefore, be exposed to the risks of a platelet transfusion without any obvious clinical benefit”

Full TextReference:

Escort, L.J., Desborough, M., Hopewell, S., Doree, C. and Stanworth, S.J. (2015) Comparison of different platelet transfusion thresholds prior to insertion of central lines in patients with thrombocytopenia. Cochrane Database of Systematic Reviews 2015, Issue 12. Art. No.: CD011771. DOI: 10.1002/14651858.CD011771.pub2.

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