

Aim of this study is to describe the incidence of complications, focusing on dislodgment and on the role of new securement devices in reducing this annoying issue” Dolcino et al (2017).

Abstract:

INTRODUCTION: The potential drawbacks of tunneled-cuffed catheters are complications such as local or systemic infection, dislodgment, rupture, malfunction, and deep venous thrombosis. Aim of this study is to describe the incidence of complications, focusing on dislodgment and on the role of new securement devices in reducing this annoying issue.

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METHODS: We enrolled all pediatric patients with tunneled-cuffed central venous catheters (CVCs) inserted at the Giannina Gaslini Institute during a 16-month period. Demographic data, technical details, intraoperative and postoperative complications were recorded and stored in a digital database according to Data Protection Act.

RESULTS: During the study period, we collected 173 tunneled-cuffed CVCs. All but three insertions were successful. There were 50 complications involving 47 CVCs. Complications included 13 infections, 27 dislodgments, 4 thromboses, 3 obstructions, and 3 malfunctions/breaking. In 51 of 173 CVCs, we used subcutaneously anchored securement device (SAS).

CONCLUSIONS: The use of SAS proved to significantly reduce the incidence of complications in pediatric patients, particularly during the first 30 postoperative days. Basing on our results we suggest to routinely adopt this new securement device for high-risk CVC.

Reference:

Dolcino, A., Salsano, A., Dato, A., Disma, N., Pini Prato, A., Bernasconi, F., Montagnini, L., Avanzini, S., Bevilacqua, M., Montobbio, G., Mattioli, G. and Zanaboni, C. (2017) Potential



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role of a subcutaneously anchored securement device in preventing dislodgment of
tunneled-cuffed central venous devices in pediatric patients. The Journal of Vascular Access.
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