



PICC-VTE was associated with a worse survival outcome in nonmetastatic NPC patients. A prospective randomized clinical trial is required to verify the results” Liang et al (2018).

Abstract:

BACKGROUND: Despite increasing use, symptomatic venous thromboembolism (VTE) associated with peripherally inserted central catheter (PICC) is a common complication in nonmetastatic nasopharyngeal carcinoma (NPC) patients.

METHODS: A total of 3012 nonmetastatic NPC patients were enrolled in this retrospective study, and we applied Cox regression and log-rank tests to assess the association between PICC-VTE and survival using the propensity score method (PSM) to adjust for gender, age, radiotherapy technique, tumor stage, node stage, UICC clinical stage and pre-treatment EBV DNA.

RESULTS: 217 patients developed PICC-VTE, with an incidence of 7.20%. PSM identified 213 patients in the cohort with VTE and 852 in that without. Patients who developed PICC-VTE had a shorter 5-year PFS (77.5% vs 87.6%, $p < 0.001$), DMFS (85.0% vs 91.2%, $p < 0.001$), LRRFS (93.9% vs 97.7%, $p < 0.001$) and OS (85.4% vs 87.6%, $p < 0.001$). Subgroup analyses indicated that no significant survival difference was found between PICC-related superficial venous thrombosis and deep vein thrombosis, nor did different anticoagulant treatment methods. **CONCLUSIONS:** PICC-VTE was associated with a worse survival outcome in

nonmetastatic NPC patients. A prospective randomized clinical trial is required to verify the results.

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Reference:

Liang, Y.J., Tang, L.Q., Sun, X.S., Fan, Y.Y., Yan, J.J., Du, Y.Y., Guo, S.S., Liu, L.T., Xie, H.J., Liu, S.L., Tang, Q.N., Li, X.Y., Mai, H.Q. and Chen, Q.Y. (2018) Symptomatic venous thromboembolism associated with peripherally inserted central catheters predicts a worse survival in nasopharyngeal carcinoma: results of a large cohort, propensity score-matched analysis. *BMC Cancer*. 18(1), p.1297.

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