



A prospective, observational study was conducted in our palliative care unit to assess the impact of peripherally inserted central catheters (PICCs), midline, and “short” midline catheters on the quality of care in cancer and non-cancer patients” Magnani et al (2018).

Abstract:

OBJECTIVES: A prospective, observational study was conducted in our palliative care unit to assess the impact of peripherally inserted central catheters (PICCs), midline, and “short” midline catheters on the quality of care in cancer and non-cancer patients. The secondary objective was to assess pain and distress during vascular access device insertion.

METHODS: Patients were recruited if they underwent insertion of a PICC, midline, or “short” midline catheter as part of their standard care. The Palliative care Outcome Scale was used to assess changes in quality of care after vascular access device positioning. A numerical rating scale was used to measure pain intensity during catheter insertion.

RESULTS: Of the 90 patients enrolled, 52.2% were male with a mean age of 73.0 ± 13 years. Among these patients, 64.4% patients underwent “short” midline insertion, 26.7% PICC, and 8.9% midline catheter. The patients’ mean baseline Palliative care Outcome Scale score was 15.7 ± 5.6 . Three days after vascular access device positioning, the patients’ mean Palliative

care Outcome Scale score was 11.5 ± 5.5 ($p < 0.0001$). Mean pain score during vascular access device insertion was 1.26 ± 1.63 , and mean procedural distress score was 1.78 ± 1.93 . CONCLUSION: These findings suggest that medium-term intravenous catheters can have a favorable impact on quality of care and the procedures for these vascular access device insertions are well tolerated. Further research on the performance of different vascular access devices and their appropriateness in palliative care should be encouraged.

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Reference:

Magnani, C., Calvieri, A., Giannarelli, D., Espino, M. and Casale, G. (2018) Peripherally inserted central catheter, midline, and “short” midline in palliative care: Patient-reported outcome measures to assess impact on quality of care. *The Journal of Vascular Access*. December 3rd. .

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