



Our objective was to evaluate whether culture of flushed withdrawn NCs is an alternative to hub culture when investigating central venous catheter colonization" Pérez-Granda et al (2016).

Abstract:

BACKGROUND: Culture of catheter hubs and skin surrounding the catheter entry site has a negative predictive value for catheter tip colonization. However, manipulation of the hub for culture requires the hubs to be swabbed, introducing potential dislodging of biofilm and subsequent migration of microorganisms. Hubs are usually closed with Will (NCs), which are replaced regularly. Our objective was to evaluate whether culture of flushed withdrawn NCs is



an alternative to hub culture when investigating central venous catheter colonization.

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METHODS: The study population comprised 49 intensive care unit patients whose central venous catheters had been in place for at least 7 days. Cultures of NCs and skin were obtained weekly.

RESULTS: We included 82 catheters with more than 7 days' indwelling time. The catheter tip colonization rate was 18.3 % (15/82). Analysis of skin and NC cultures revealed a 92.5 % negative predictive value for catheter colonization. Three episodes of catheter-related bloodstream infection (C-RBSI) occurred in patients with colonized catheters.

CONCLUSION: Surveillance of NC and skin cultures could help to identify patients at risk for C-RBSI.

Reference:

Pérez-Granda, M.J., Guembe, M., Cruces, R., Barrio, J.M. and Bouza, E. (2016) Assessment of central venous catheter colonization using surveillance culture of withdrawn connectors and insertion site skin. Critical Care. 20(1), p.32.

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