To determine if ending the practice of administering prophylactic antibiotics prior to the placement of totally implantable venous access devices (TIVADs) is correlated with an increase in 30-day bloodstream infection-related TIVADs removals” Choksi et al (2019).

Abstract:

BACKGROUND: To determine if ending the practice of administering prophylactic antibiotics prior to the placement of totally implantable venous access devices (TIVADs) is correlated with an increase in 30-day bloodstream infection-related TIVADs removals.

METHODS: The practice of administering prophylactic antibiotics prior to the placement of TIVADs ended in July 2013 at our institution. We compiled a list of patients who had TIVADs placed between July 2010 and July 2016 and cross-referenced this list to a list of patients who had TIVADs removed between July 2010 and August 2016 to evaluate the 30-day bloodstream infection-related TIVAD removals. Retrospective chart review of all patients was performed to collect demographic information, indication for placement, and type of antibiotic administered, if applicable.

RESULTS: Over the study period of 6 years, a total of 1,513 TIVADs were placed, of which 28 cases were excluded because of death within 30 days unrelated to TIVAD placement. Of the remaining 1,485 cases, 733 TIVADs were placed in 709 unique patients with prophylactic antibiotic treatment and 752 TIVADs were placed in 709 unique patients without treatment. A total of 8 patients were identified to have TIVADs removed within 30 days owing to infection, of which 4 patients were treated with prophylactic antibiotics. The odds of infection-related removals without prophylactic treatment compared with prophylactic treatment was 0.97 (95% confidence interval, 0.24-3.91; P = .97).

CONCLUSIONS: Ending the practice of administrating systemic antibiotic prophylaxis prior to the placement of TIVADs had no effect on the 30-day bloodstream infection-related TIVAD removals rate at our institution. We do not recommend the use of prophylactic antibiotics for the placement of TIVAD.
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