



In order to reduce the rate of complications of CVCs it is indispensable to perform a risk-benefit analysis for the individual patient before every insertion” Aprili and Erb (2017).

Abstract:

Central venous catheters (CVCs) are an important tool in the treatment of children. The insertion of a catheter may result in different complications depending of the type of catheter, the technique used for the insertion and the location.

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There are various techniques to reduce the risk of complications. In order to reduce the rate of complications of CVCs it is indispensable to perform a risk-benefit analysis for the individual patient before every insertion. The type of catheter used (for example tunneled catheters versus not-tunneled catheters) influences the rate of catheter-associated infections and the comfort of the patient significantly. The choice of the location is influenced by the expected indwelling time, the weight of the patient and the purpose of the CVC. Insertion via the vena jugularis interna is often chosen because of the reduced rate of complications during insertion. When the planned indwelling time of the catheter is longer or the child is fairly small the vena subclavia appears to be more appropriate. It is of utmost importance

that the patient is positioned properly before insertion. Whenever possible the insertion should be performed with the help of ultrasound. The positioning of the catheter should be verified radiographically, possibly sonographically or with an ECG in order to avoid misplacement with potentially severe sequelae. The locally established hygienic guidelines should be strictly adhered to and everyone handling CVCs (doctors, nurses and patients) should have regular training.

Reference:

Aprili, D. and Erb, T.O. (2017) Avoidance of complications when dealing with central venous catheters in the treatment of children. *Anaesthesist*. February 7th. . .

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