



CVC repair is a highly successful procedure with a low risk for infection. Catheter repair should be considered whenever possible as it may extend the lifetime of the catheter and decrease the risk for vascular access loss” Chan et al (2018).

Abstract:

**PURPOSE:** Damaged central venous catheters (CVCs) are commonly repaired to avoid line replacement and preserve vascular access. However, limited data suggest an increased risk for central line-associated bloodstream infections (CLABSIs) associated with the repair procedure. The purpose of this study was to describe outcomes of CVC repairs among parenteral nutrition (PN) dependent children with intestinal failure (IF).

**METHODS:** A 2-year retrospective review was performed on children with IF on home PN > 6 months. Outcomes of interest were repair success and postrepair CLABSI incidence. Descriptive statistics included medians and frequencies.

**RESULTS:** A total of 36 pediatric IF patients underwent 96 CVC repairs during the study period. The median CVC repair count was 1.5 repairs/patient (range, 1 to 16 repairs/patient) with >1 repair in half the patients. Ninety-four broken catheters (98%) were successfully repaired with restoration of function. Of the unsuccessful repairs (2%), the two catheters eventually required surgical removal and replacement. One repair (1%) was followed by a CLABSI with *Enterococcus faecalis* in an immunocompromised patient.

CONCLUSION: CVC repair is a highly successful procedure with a low risk for infection. Catheter repair should be considered whenever possible as it may extend the lifetime of the catheter and decrease the risk for vascular access loss.

LEVEL OF EVIDENCE: Treatment study; level IV.

Reference:

Chan, A.P., Baldivia, P.S., Reyen, L.E., Lund, A.N., Marcus, E.A., Venick, R.S., Vargas, J.H. and Wozniak, L.J. (2018) Central venous catheter repair is highly successful in children with intestinal failure. *Journal of Pediatric Surgery*. June 9th. .

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