



Differences between hospitals with regard to major complications, infection and occlusion may be related to different care protocol” García-Gabás et al (2015).

Reference:

García-Gabás, C., Castillo-Ayala, A., Hinojo-Marín, B., Muriel-Abajo, M.Á., Gómez-Gutiérrez, I., de Mena-Arenas, A.M., Rodríguez-Gonzalo, A., Chao-Lozano, C., García-Menéndez, C. and Madroñero-Agreda, M.A. (2015) Multicenter descriptive study of complications associated to central venous catheters in hematology patients. Enfermería Clínica. May 7th. . .

Complications associated to central venous catheters in hematology patients

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Abstract:

OBJECTIVE: To discover the incidence of central venous catheters (tunnelled, subcutaneous and PICC) in patients with onco-hematological conditions, hospitalized in the Hematology or Transplantations of Hematopoietic Stem Cells Units, in two tertiary care hospitals.

METHODOLOGY: A cross-sectional, descriptive study form was developed in order to gather sociodemographic, clinical data as well as complications and follow-up of the care protocol. Each catheter was assigned a correlative identification number. Information was collected on 366 catheters: 185 in the University Hospital Ramón y Cajal (HURYC), 80 tunnelled, 40

subcutaneous venous access and 65 PICC, and 181 in the University Hospital Gregorio Marañón (HUGM), 101 tunnelled and 80 subcutaneous venous access.

FINDINGS: Major complications in the tunnelized were infections (13.7% in HURYC vs. 6.8% in HUGM - $p < 0.001$) and occlusions (at least once in 3.8% vs. 21.8%). In subcutaneous venous access, infections were confirmed in 5% in HURYC vs. 1.2% in HUGM. There were occlusions at least once in 10% in HUGM and no other significant complications were detected.

Regarding PICC, information was only collected in HURYC, where complications were phlebitis 10.8%, thrombosis 7.7%, confirmed or suspected infection 4.6%, occlusion at least once 7.7%.

CONCLUSIONS: Differences between hospitals with regard to major complications, infection and occlusion may be related to different care protocol. We need to stress the high incidence of phlebitis and thrombosis in PICC catheters, compared with data of lower incidence of other papers.

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