



This study aimed to determine if differences exist in CVC patency, tissue plasminogen activator usage, and the incidence of central line-associated bloodstream infections when flushing with normal saline only versus heparin and normal saline among patients undergoing BMT” Klein et al (2018).

Abstract:

BACKGROUND: Patients undergoing blood and marrow transplantation (BMT) use a central venous catheter (CVC); heparin is often employed to maintain patency but may increase the risk of complications. Research has not provided conclusive differences in efficacy and safety regarding heparin flushing versus normal saline flushing in CVC maintenance. Minimal research is specific to this patient population.

OBJECTIVES: This study aimed to determine if differences exist in CVC patency, tissue plasminogen activator usage, and the incidence of central line-associated bloodstream infections when flushing with normal saline only versus heparin and normal saline among patients undergoing BMT.

METHODS: A convenience sample of 30 patients undergoing allogeneic or autologous transplantation with a new non-port/non-peripherally inserted CVC were evaluated.

FINDINGS: Elimination of routine heparin use could positively affect outcomes in this patient



population.

Reference:

Klein, J., Jepsen, A., Patterson, A., Reich, R.R. and Mason, T.M. (2018) Heparin Versus Normal Saline: Flushing Effectiveness in Managing Central Venous Catheters in Patients Undergoing Blood and Marrow Transplantation. *Clinical Journal of Oncology Nursing*. 22(2), p.199-202.

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