We sought to assess the incidence of IVAD-related upper extremity deep vein thrombosis (IVAD-related UEDVT) associated with BioFlo® IVADs (Angiodynamics, Inc.)” Suleman et al (2019).

Abstract:

BACKGROUND: Implanted vascular access devices (IVADs) have significantly improved the management of cancer patients. These patients are at an increased risk of venous thromboembolism and IVADs are a known risk factor. We sought to assess the incidence of IVAD-related upper extremity deep vein thrombosis (IVAD-related UEDVT) associated with BioFlo® IVADs (Angiodynamics, Inc.).

METHODS: A total of 394 cancer patients were enrolled over 12 months. The primary outcome was the incidence of IVAD-related UEDVT confirmed by diagnostic imaging. IVAD-related UEDVT was defined as symptomatic ipsilateral upper extremity (axillary vein or proximal) deep vein thrombosis and symptomatic pulmonary embolism (PE). Patients were followed until initiation of therapeutic anticoagulation, catheter removal, death, or up to 12 months.

RESULTS: 389 patients were included in the analysis. The median age of the cohort was 58.2 years; 68% (n = 273) were females. Sixty-six percent had gastrointestinal cancer (including pancreatic cancer) and 68% had metastases. Eighty four percent of IVADs were right sided insertions. Ninety eight percent of catheter tip placements were distal superior
vena cava (n = 237), cavo-atrial junction (n = 67) or atrium (n = 90). Overall, 5 patients had symptomatic IVAD-related UEDVT (1.29%, 95% CI 0.2 to 2.4%).

CONCLUSION: IVAD-related UEDVT is an infrequent complication in cancer patients with BioFlo® IVADs.

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