The aim of this study was to compare the perioperative outcomes when using a micropuncture access set (MS) to those when using a conventional puncture set (CS) for implantation of totally implantable venous access device (TAVID)" Lee et al (2019).

Abstract:

BACKGROUND: The aim of this study was to compare the perioperative outcomes when using a micropuncture access set (MS) to those when using a conventional puncture set (CS) for implantation of totally implantable venous access device (TAVID).

METHODS: A total of 314 patients undergoing chemotherapy for colorectal cancer were included between June 2015 and July 2018. Of these, 123 (39.2%) received TAVID implantation using MS and 191 patients (60.8%) received TAVID using CS. Perioperative outcomes and complications were compared between both groups.

RESULTS: Baseline characteristics, including body mass index, American Society of Anesthesiologists score, cardiovascular disease, diabetes mellitus, and hyperlipidemia, were not significantly different between the groups. Postoperative complications occurred in 25 patients (8.0%), and the rate and incidence of venous thrombosis were significantly higher in the CS group. There were no significant differences between the groups in other complications such as the rate of port site infection, deep vein thrombosis, obstruction, catheter dislocation, and skin complications (exposure). No incidence of catheter infection,

port rotation, intraoperative bleeding, or pneumothorax was observed in this cohort.

CONCLUSIONS: MS is a safe and feasible procedure and results in less thrombosis. MS may play an important role in improving outcomes for the implantation of TAVID.

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Reference:
Lee, C.S., Yoon, S.H., Lee, S.M., Lee, I.K., Kim, J.Y., Cho, H.M. and Kim, M.K. (2019) Micropuncture Access Set Use During Implantation of Totally Implantable Venous Access Device May Reduce Upper Extremity DVT Incidence Among Patients Undergoing Chemotherapy for Colorectal Cancer. World Journal of Surgery. December 18th. doi: 10.1007/s00268-019-05336-w. .