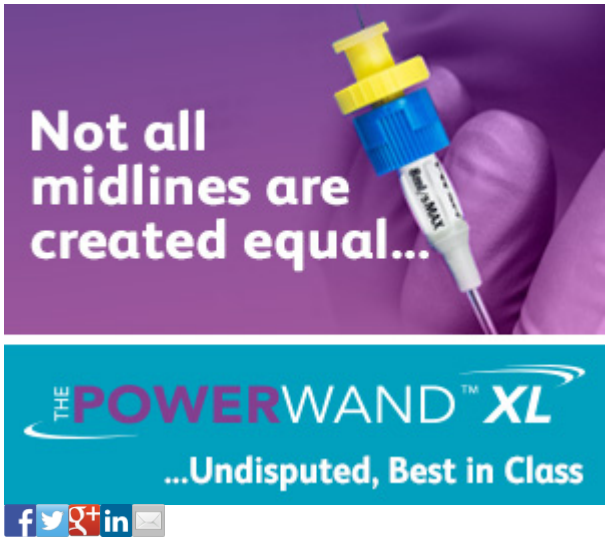

At the time of our study, agents with pH of 9 were wrongly considered an indication for central venous access. This false indication has been removed from the 2016 Infusion Therapy Standards of Practice" Caparas and Hu et al (2016).

Extract:

"The authors appreciate the thoughtful letter from Spencer and Bardin (1). In addressing their concerns, it is important to bear in mind two facts: (i) Because of the risks of central line-associated blood-stream infection (CLABSI) (1%-3%) and peripherally inserted central catheter (PICC)-associated deep-vein thrombosis (DVT) (silent DVT = 71.9%, clinical DVT = 5%-7%), PICCs can no longer be assumed to deliver risk-free central venous access; and (ii) not all midlines perform the same (2).

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At the time of our study, agents with pH of 9 were wrongly considered an indication for central venous access. This false indication has been removed from the 2016 Infusion Therapy Standards of Practice. As shown by Gorski et al, the pH of intermittently delivered medications categorically does not cause thrombophlebitis (3)" Caparas and Hu et al (2016).

Full Text

Reference:

Caparas, J.V. and Hu, J-P. (2016) Safe administration of long-term vancomycin through a novel midline catheter: a response to letter to the editor. The Journal of Vascular Access. 17(4), p.293 – 372, e65 – e141.

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