“Parenteral nutrition is crucial when the use of the gastrointestinal tract is not feasible. This article addresses the main techniques for parenteral access in children, its indications, insertion details and maintenance, and complications” Estévez-Costa (2014).

Reference:


Abstract:

Parenteral nutrition is crucial when the use of the gastrointestinal tract is not feasible. This article addresses the main techniques for parenteral access in children, its indications, insertion details and maintenance, and complications. The type of venous access is mainly dictated by the expected duration of parenteral nutrition and by the body weight/stature. The peripheral access is viable and advantageous for parenteral nutrition of short duration (< 2 weeks); a tunneled central venous catheter (Broviac) is usually necessary in long-term parenteral nutrition (> 3 weeks); a peripherally introduced central catheter is an increasingly used alternative. Parenteral accesses are effective and safe, but the morbidity and mortality is not negligible particularly in cases of short bowel syndrome. Most complications are related to the catheter placement and maintenance care, and can be largely avoided when the procedures are carried out by experienced staff under strict protocols.

Thank you to our partners for supporting IVTEAM