To study the magnitude of the complication of catheter associated right atrial thrombus (CRAT) in patients with tunnelled central venous hemodialysis catheters (THC) for maintenance hemodialysis (MHD) Bichu et al (2018).

Abstract:

OBJECTIVE: To study the magnitude of the complication of catheter associated right atrial thrombus (CRAT) in patients with tunnelled central venous hemodialysis catheters (THC) for maintenance hemodialysis (MHD).

MATERIAL AND METHODS: A retrospective study was conducted among patients with end stage kidney disease (ESKD) with THC for MHD who had undergone screening for CRAT with a 2D-echo (2DE) just before removal of the THC. The occurrence of CRAT and other clinical parameters were documented in these patients.

RESULTS: A total of 28 patients (mean age 51 [15.2] years; females 17 [60.7%]) were included in the study. CRAT was observed in 5 (17.9%) patients. There was no difference in mean age in patients with or without thrombus (48±13.02 vs 51.61 ± 15.78 years; p = 0.61). History of diabetes and hypertension was present in 2 and all 5 patients respectively. There was no significant difference in the period the THC was in place in patients with or without CRAT (13±7.8 months vs 10.57±5.66 months; p = 0.54). There was no association between catheter related blood stream infection (CRBSI) and CRAT (p = 0.29).
CONCLUSION: The incidence of CRAT in patients with THC for MHD was 17.9%. Patients with THC for MHD should be examined for presence of CRAT before removal of THC to prevent fatal pulmonary thromboembolism.

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Reference: