Six-day infusion decreased the incidence of CRBSI after gastrectomy without increasing postoperative complications.

Intravenous literature: Kawamura, H., Tanioka, T., Kuji, M., Shibuya, K. and Takahashi, M. (2012) Effect of shorter term of intravenous infusion for reduction of catheter-related bloodstream infection after gastrectomy. International Surgery. 97(4), p.345-50. Abstract: After gastrectomy, a longer period of intravenous alimentation is required than for other digestive surgeries, portending a higher risk of catheter-related bloodstream infection (CRBSI). From assessment of CRBSI occurring between 2004 and 2007 (preintervention group), the duration of intravenous infusion between 2008 and 2010 (postintervention group) was changed to shorter-term (6-day) infusion. To verify the effect of changes in injection schedule on the incidence of CRBSI, the occurrence of CRBSI was studied comparatively among preintervention and postintervention cases, excluding cases requiring intravenous infusion preoperatively, and cases requiring long-term intravenous infusion postoperatively due to postoperative complications. The rate of CRBSI in the postintervention group (0%; 0 of 298) was significantly lower than that in the preintervention group (1.7%; 8 of 477; \( P = 0.026 \)). There was no significant difference between preintervention and postintervention groups in postoperative complications. Six-day infusion decreased the incidence of CRBSI after gastrectomy significantly, without increasing postoperative complications.