This article follows on from a previous discussion of the benefits of this approach, which illustrated and examined clinical outcomes of trapezius-placement versus anterior chest wall placed ports, for patients with metastatic subcutaneous disease on the anterior chest wall” Hill (2016).

Abstract:

Totally implantable vascular access devices (TIVADs) are indicated for intermittent long-term intravenous access. It is widely accepted within medical literature that TIVADs are associated with statistically significant lower infection rates than other central venous access devices. Typical sites for implantation are on the anterior chest wall, using the internal jugular, axillary, cephalic or a subclavian vein.

Reference:


Thank you to our partners for supporting IVTEAM