

Hot Topic Question November 2016

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Which is the best line for a 4 year old with osteomyelitis who needs antibiotic therapy?

- Tunnelled central venous access device
- PICC

Accompanying text and algorithm

Answer- PICC

Central Venous Access Devices (CVAD):

- Catheters whose tip terminates in a central vessel
- These are suitable for infusions requiring central venous infusion e.g. cytotoxic chemotherapy, TPN and extended antibiotic therapy
- Central Venous Catheters can be tunnelled or non-tunnelled, tunnelled lines may have a cuff close to the exit site which helps to secure the catheter position

Types of CVADs

Central Venous Catheters

- **Non-tunnelled CVC** inserted into a central vein for short term access.
- **Tunneled cuffed CVCs** include HICKMAN™, BROVIAC™, permacaths (tunnelled cuffed haemodialysis catheter). These 'permanent' devices tend to be placed by radiologists or surgeons. The presence of a cuff decreases the likelihood of displacement over time. These devices are placed when central access is needed for months to years.

- **Tunnelled non cuffed CVCs** are an alternative to a PICC line in a patient less than 1yr or 10kg (these thresholds may vary at other centres). These can be used for up to 2-3 months.
- **Vascaths** - double lumen non tunnelled temporary haemodialysis catheters are usually placed in the femoral vein for dialysis, haemofiltration, plasmafiltration or harvesting.

Percutaneously Inserted Central Catheters (PICCs)

- A long catheter inserted into the basilic, brachial or cephalic vein positioned so that the tip terminates in the lower third of the SVC.
- May be open ended or have valves.
- Bleeding at the insertion site less likely so may be useful in the presence of coagulopathy and low platelet levels.
- Dwell time >7 days – 2-3 months.

Choosing an appropriate CVAD

a) Considerations for the type of CVAD include:

- Therapeutic indication
- Estimated length of treatment (**note: any patient requiring more than seven days of intravenous therapy should have early assessment for insertion of a central venous access device**)
- Medical history (including any cardiac anomalies or haematological disorders) and previous history of line complications (such as thrombosis)
- Vein status (**difficult peripheral IV access should be a flag for early insertion of a central venous access device if the expected duration of IV therapy exceeds seven days**)
- The correct care must be available during and following insertion of venous access devices to ensure correct function and to limit the potential for complications

b) Catheter selection

c) No of lumen

- Minimise the number of lumens to limit the risk of infection. Where clinically practical restrict to one.

TEMPORARY

(>7days - 2-3 months)

Haemodialysis,
Harvesting

IVAB's, TPN,
Chemotherapy,
IV therapies

<10kg and/or <1year

>10kg and >1year

**Non-tunnelled
Haemodialysis
Catheter**
(usually placed
femoral vein)

**Tunnelled
Non-cuffed
Central Venous
Catheter**
or
Cuffed PICC
PICC

PICC
(could be performed
under local or GA)

**Tunnelled
Haemodialysis
Catheter**
(cuffed, for dialysis
patients only)

PERMANENT

(>1 month)

BMT, TPN, Chemotherapy,
Haemodialysis and other IV
therapies (dextrose and albumin
Infusions, blood product dependent)

**Tunnelled
Haemodialysis
Catheter**
(cuffed, for dialysis
patients only)

**Tunnelled
cuffed
CVC**

**Venous
Port Device**
Low Profile
Device Standard
Size

Great Ormond Street Hospital interventional radiology
guidance but always discuss with your local teams