TUNNELED-CATHETER RELATED BACTEREMIA PREVENTIVE PROTOCOL: RESULTS ANALYSIS

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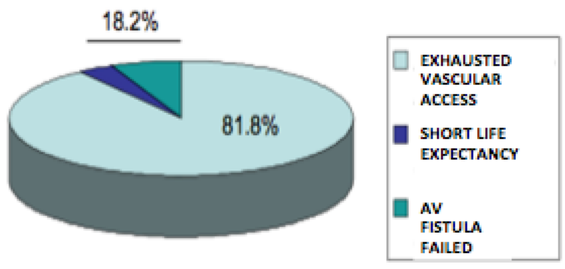
The increasing use of tunneled catheters for hemodialysis is associated with a number of complications, particularly catheter-related bacteremia. The implementation of a pre-emptive protocol during the preimplantatory period and the maintenance cares could reduce the catheter-related bacteriemia rate, even though there is no consensus in bibliography. Since 2006 there is a preimplantatory protocol in our department, it was developed between nephrologists and infectologists, it contains nasal decolonisation in case of staphylococcal colonisation, a shower-bath with clorhexidine gel and prophilactic cefazoline before the procedure.

OBJETIVES: Analyze the results obteined in our department regarding to catheter-related bacteriemia in tunneled catheter implanted by ourselves .

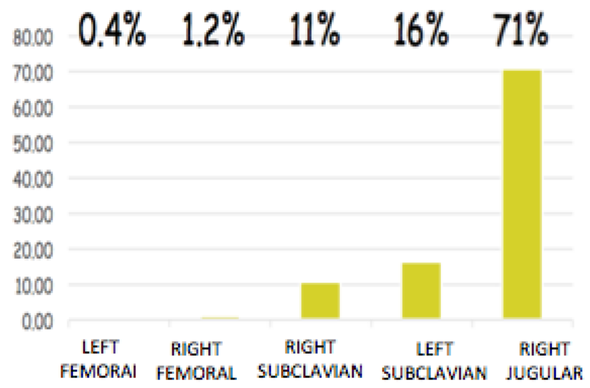
METHODS: our pre emptive protocol is being implemented in 246 tunneled catheter, implanted in 107 patients, average age 63 yo. Most frequent renal disease was diabetic nephropathy (25%). 132 months was the average follow-up period. Incidence of bacteriemia, time of appearance of the bacteriemia after the implantation, bacteria types and complications associated.

RESULTS:

INDICATION OF TUNNELED CATHETER INSERTION



CATHETER LOCATION

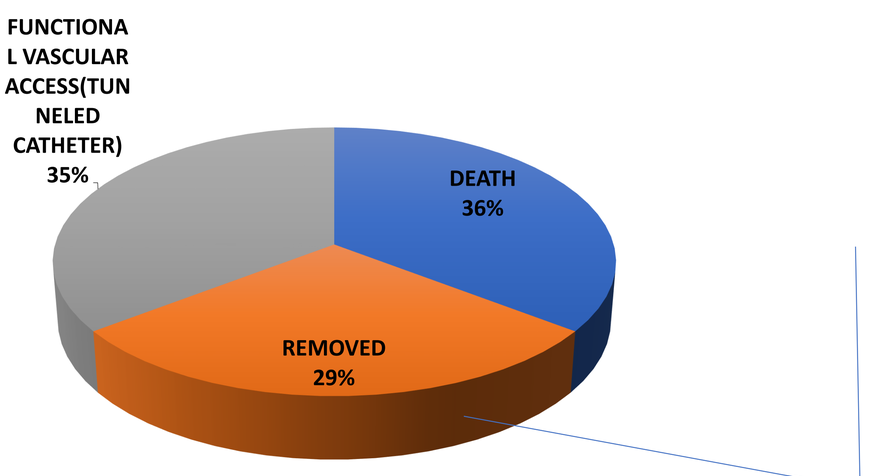


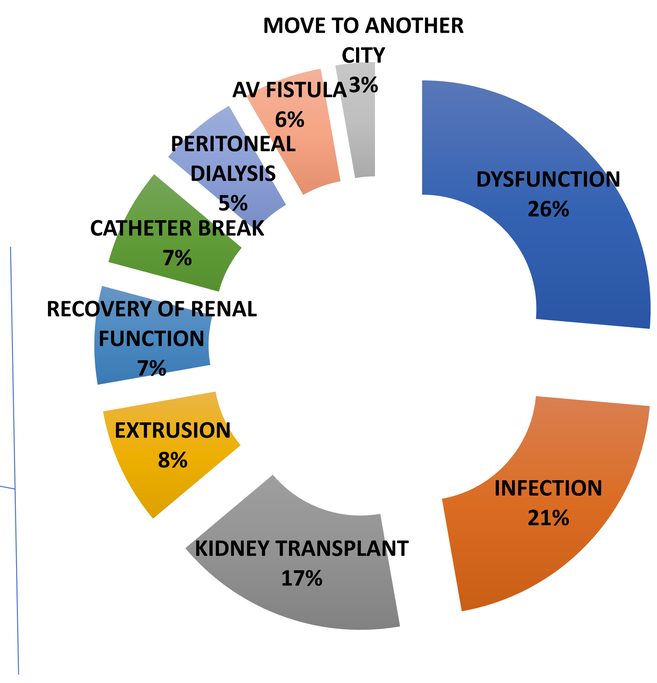
INSERTION COMPLICATIONS

w/o COMPLICATIONS	96,30%
BLEEDING	1,20%
DYSPNEA	0,40%
HAEMATOMA	0,80%
HEMOTHORAX	0,40%
PNEUMOTHORAX	0,40%

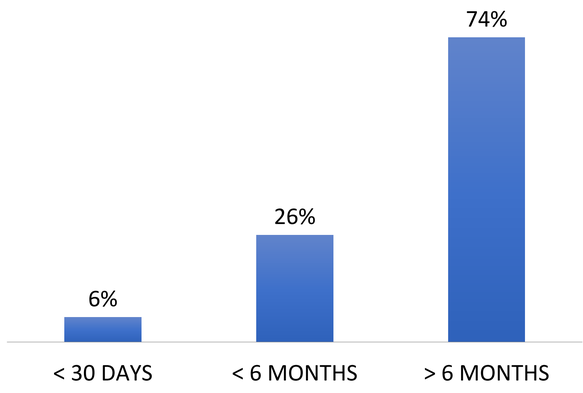
CATHETERS OUTCOMES

FOLLOW-UP TIME: 131 MONTHS



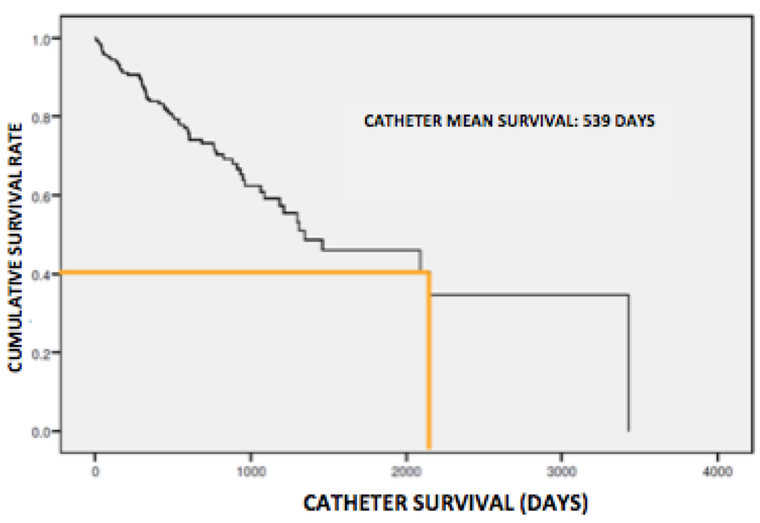


CRB AFTER INSERTION

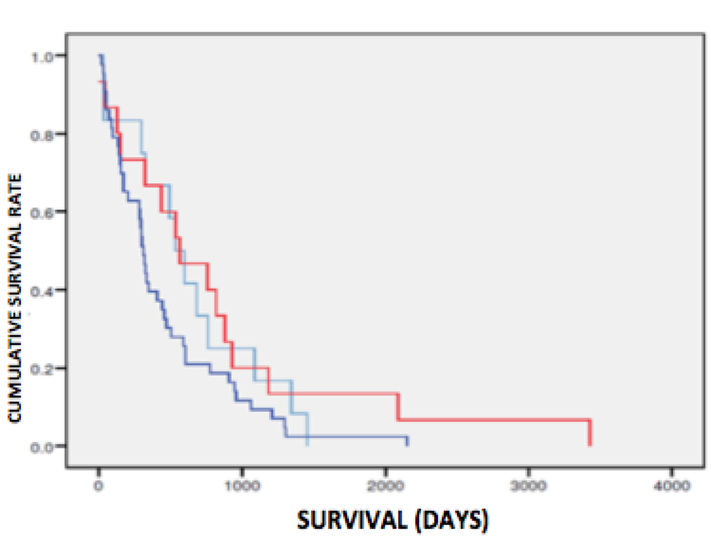


CRB INCIDENCE	0,48 cases/1000 days-catheter
PRIMOINFECTION	71,80%
MEAN TIME OF CRB MANIFESTATION	19,31±14 months after insertion

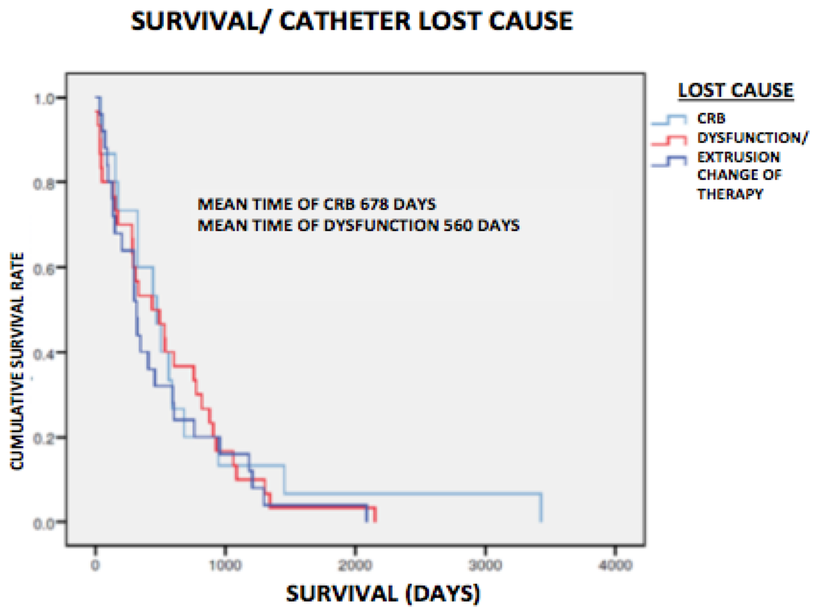
TUNNELED CATHETER SURVIVAL



CATHETER SURVIVAL/CATHETER LOCATION



SURVIVAL/ CATHETER LOST CAUSE



CONCLUSIONS: In our experience, tunneled catheter-related bacteriemia rate is really lower than reported in bibliography. Our pre-emptive protocol has delayed the catheter-related bacteriemia incidence, the primoinfection was showed more than one year after tunneled catheter implantation. Recurrence rate was high and the most frequent microorganism was Staf. Epidermidis. The incidence of other complications and the need of removing the catheter is low.

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