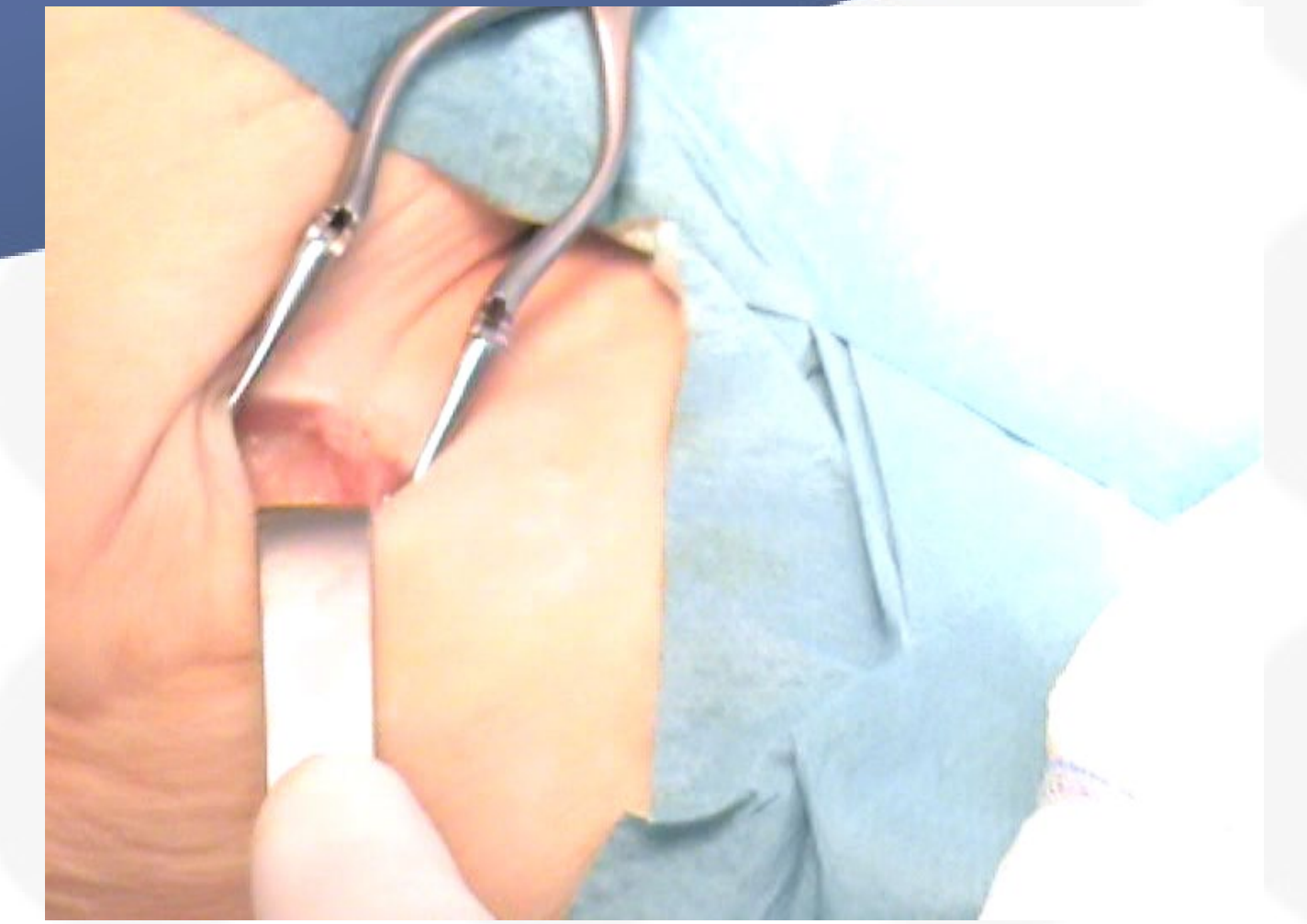
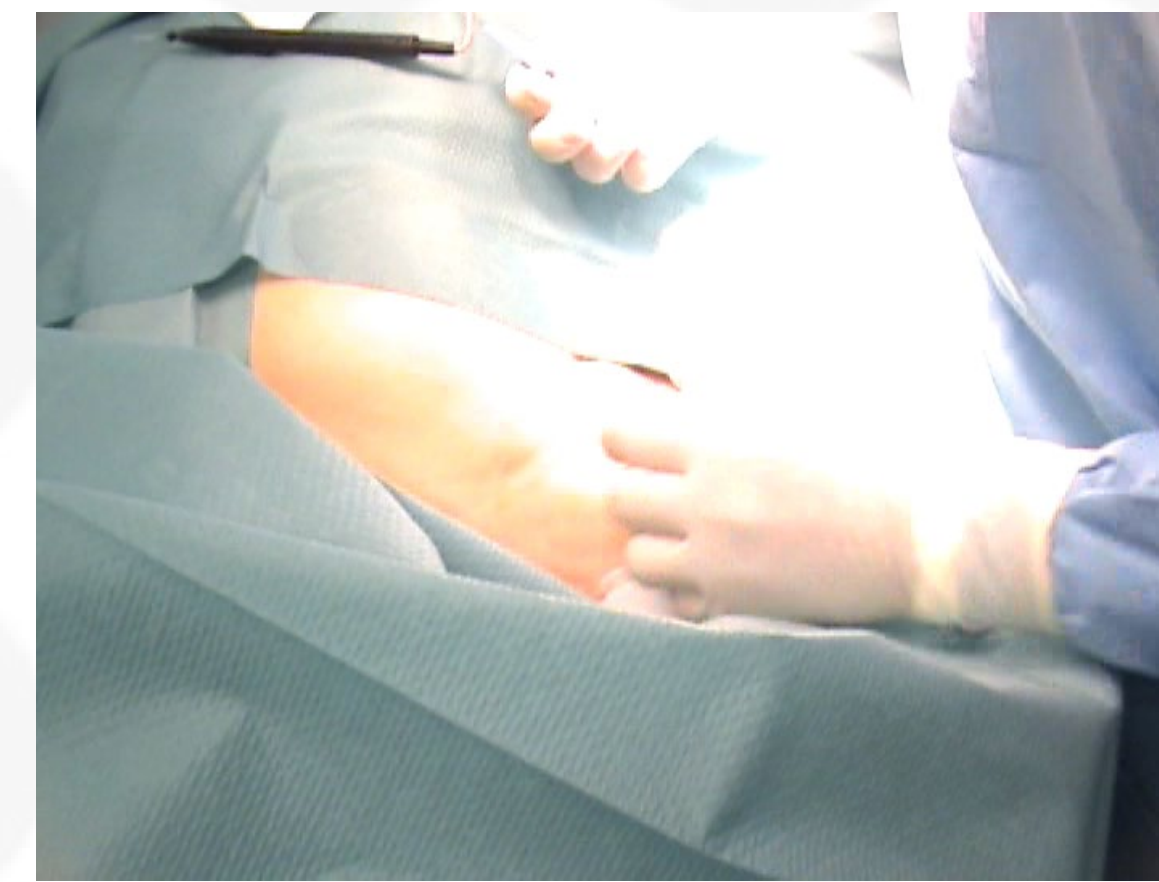


Managing and Organizing Deep veinous central access device: The experience of the Orleans Hospital

Rémy Sindayigaya M.D, Adel Abou-Mrad M.D.



Introduction : Deep veinous Central access implantable device is commonly used especially for chemotherapy enhancing comfort and patient's quality care.



Materials and methodes

This is a descriptive retrospective review of one surgeon experience, presenting the managing care, specific operating technical guidelines, and outcome.

From first January 2012 till end of December 2014, 1359 patients mostly with Brest cancer, were operated. Indications were mostly chemotherapy.

Elle est
méchante

Patients consult on a fixed day weekly. They were provided oral and written procedure's details and potential complications. General and specific local counter-indications were specified. They were called the eve of surgery to exclude intercurrent incidents influencing the operation.

At the one-day surgery department a two hour's hospital stay was planned. On a special day, once a week, an average of 12 patients (10 – 15) were operated on a 40mn course. Patients went on feet to and out of the operating theater.

Under local anesthesia, through a vertical 2 to 3 cm incision on the delto-pectoral groove, a PEROUSE° Polysite° 6 or 7 F catheter was inserted in the cervical vein and placed radiologically 1 to 2 cm under the carena. Subclavian or echo-guided internal jugular vein were accessed in case of failure.

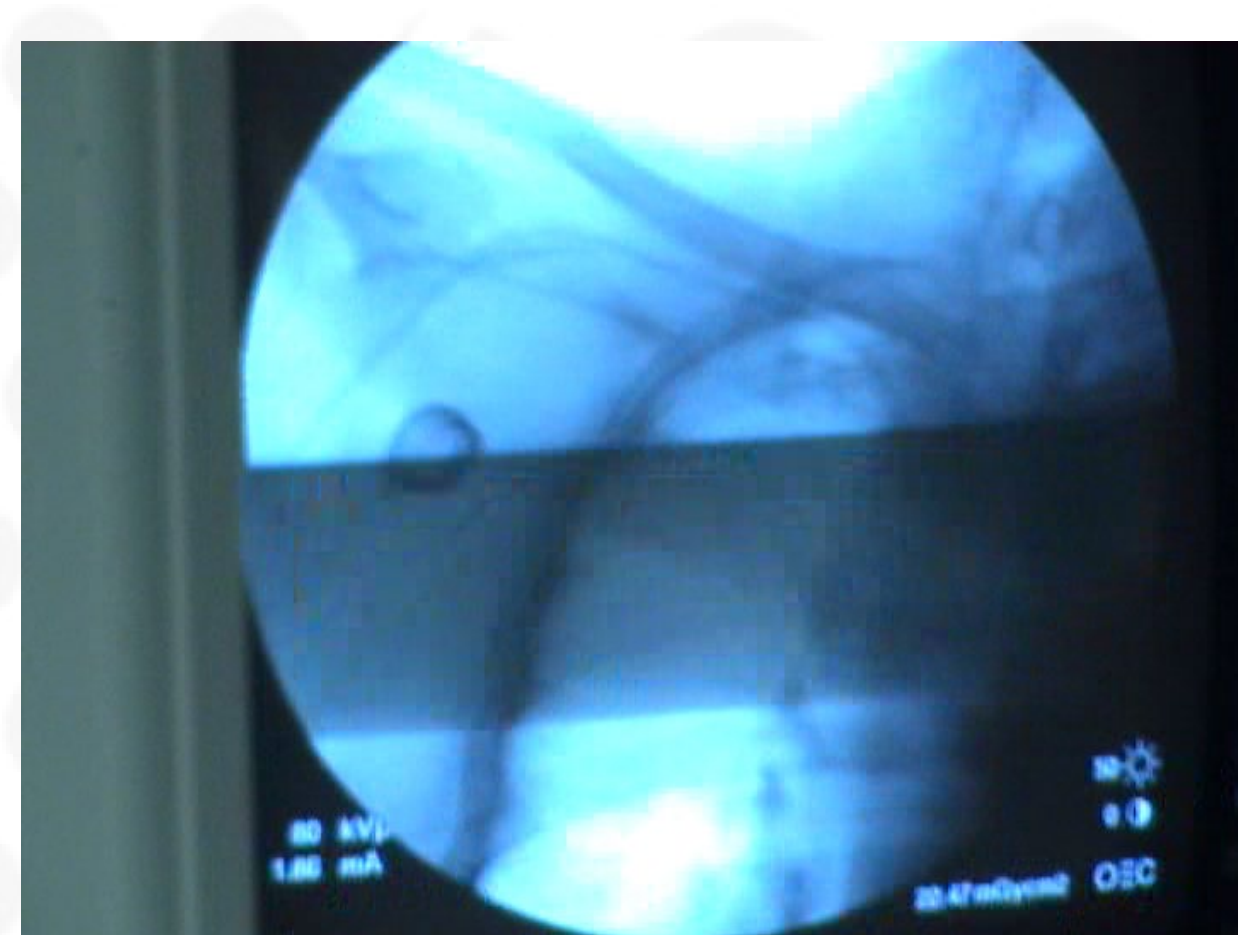
Results:

Catheter were withdrawn mostly for secondary infection (n=45), thrombosis (n=8), catheter migration (n=3), occlusion (n=2), one extravasation, and one turned device. There were no pneumothorax, embolism, or primary infection.

Most patients kept the device till the end or till cancer remission was pronounced.

Conclusion

Preoperative assessment, careful selection, strict well-organized management and patient's flow to and out of the O.R. added to a standardized quick simplified surgical technique, enhance the patient's quality care, and reduce psychological operative patient's impact and surgical morbidity.



EVENEN

