

Introduction

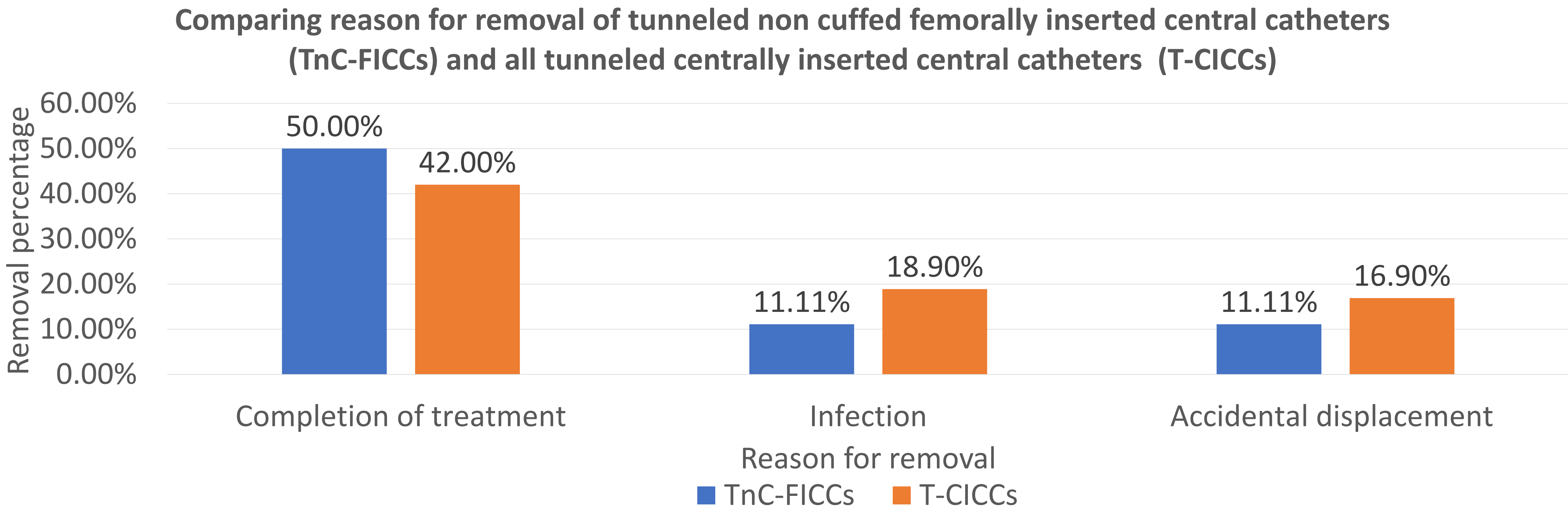
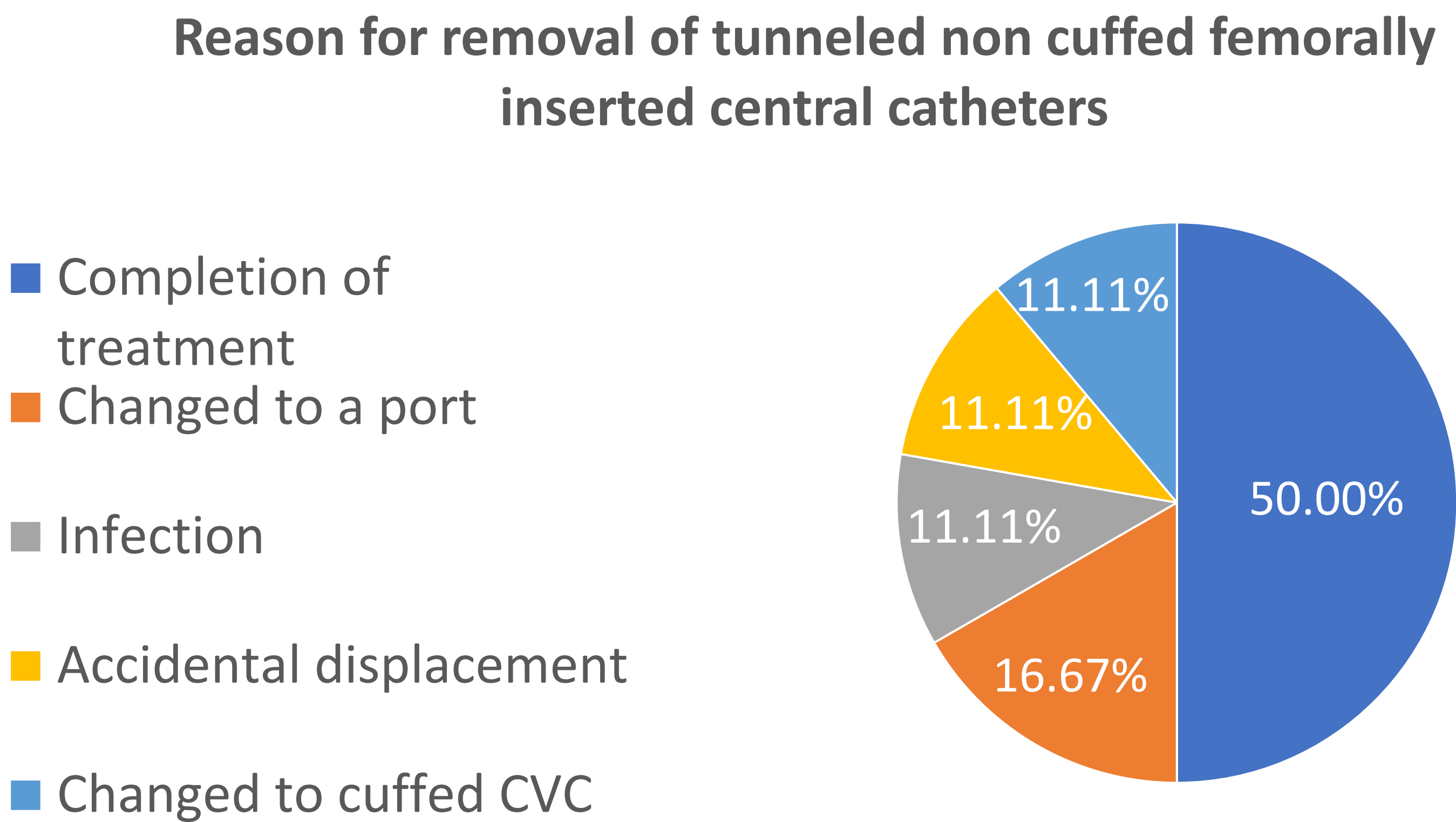
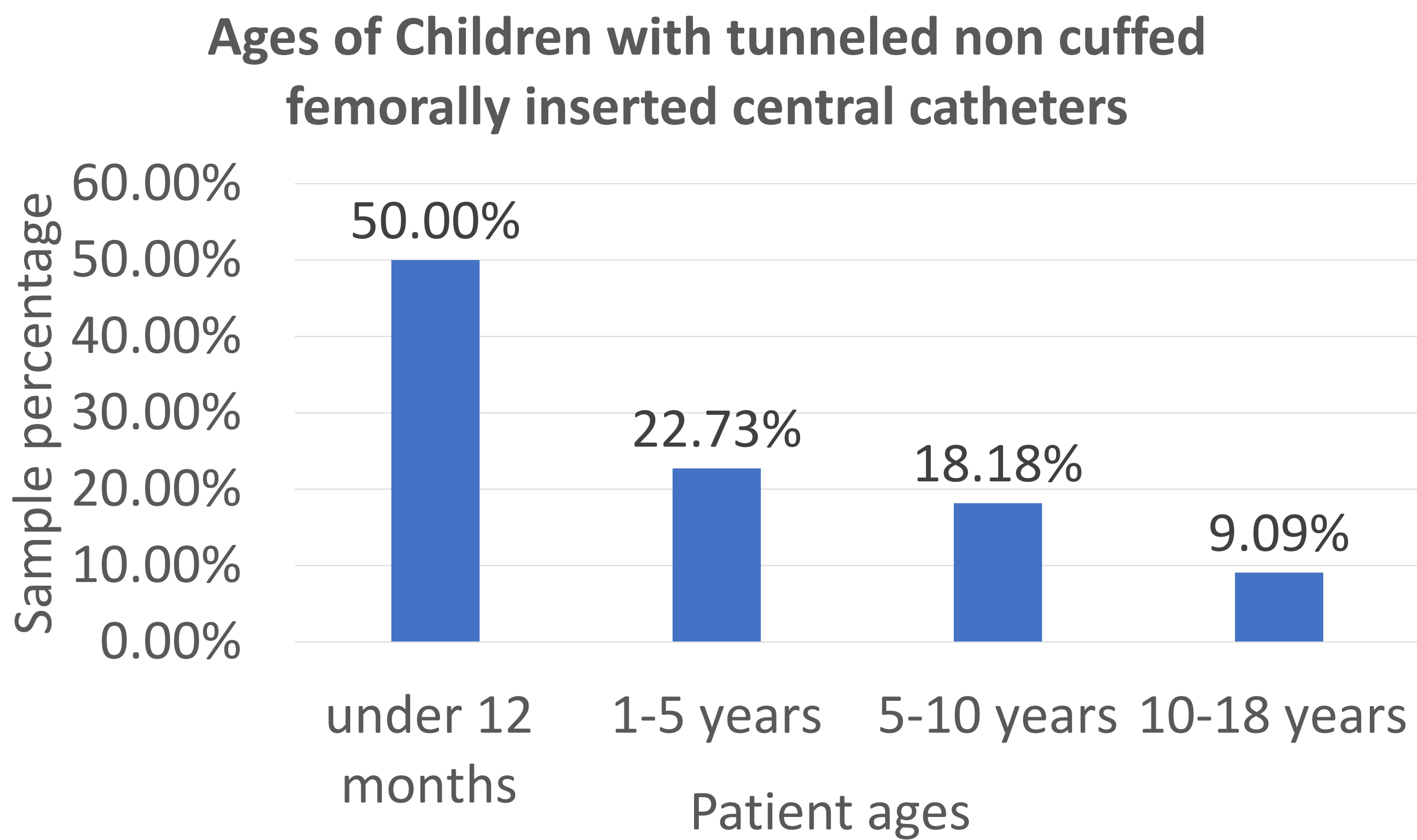
Over recent years there have been large changes in femoral access. Newer insertion techniques, the ability to check tip location and the World Conference on Vascular Access definition of “central” venous access have led to the use of tunneled non cuffed femorally inserted central catheters (TnC-FICCs). We wanted to review our current usage of these and compare their outcomes to that of other tunneled centrally inserted central catheters (T-CICCs).

Method

We searched the internal database of the Manchester Access Group in Children (MAGiC) and identified any patients from November 2023 to October 2025 who had a TnC-FICC inserted . These patients' notes were reviewed and we compared this data to that of all T-CICCs inserted at Royal Manchester Children’s Hospital.

Results

We reviewed 469 procedures and identified 22 TnC-FICCs inserted (4.7%). Of these 2 were transferred to other hospitals therefore were unable to be followed up and 2 still had their lines in situ at the time of review. Of the 20 we were able to fully follow up 2 thrombus were identified (10%). The mean dwell time for TnC-FICCs was 52 days and for all T-CICCs 167 days.



Discussion

TnC-FICCs are still a relatively new procedure at our institution so we only have a small sample to draw conclusions from. We can see that TnC-FICCs had a much higher usage in younger children with 50% being used in children under 12 months and then usage reducing with age. TnC-FICCs also compared favorably to all T-CICCs with a higher percentage completing treatment and fewer removed due to displacement and infection. However, a much larger sample would be needed to give more weight to these findings.