

Observational Retrospective Study Confirms Safety, Performance and Utility of an Antimicrobial/Antithrombogenic

Peripherally Inserted Central Catheter in Adults and Pediatric Patients

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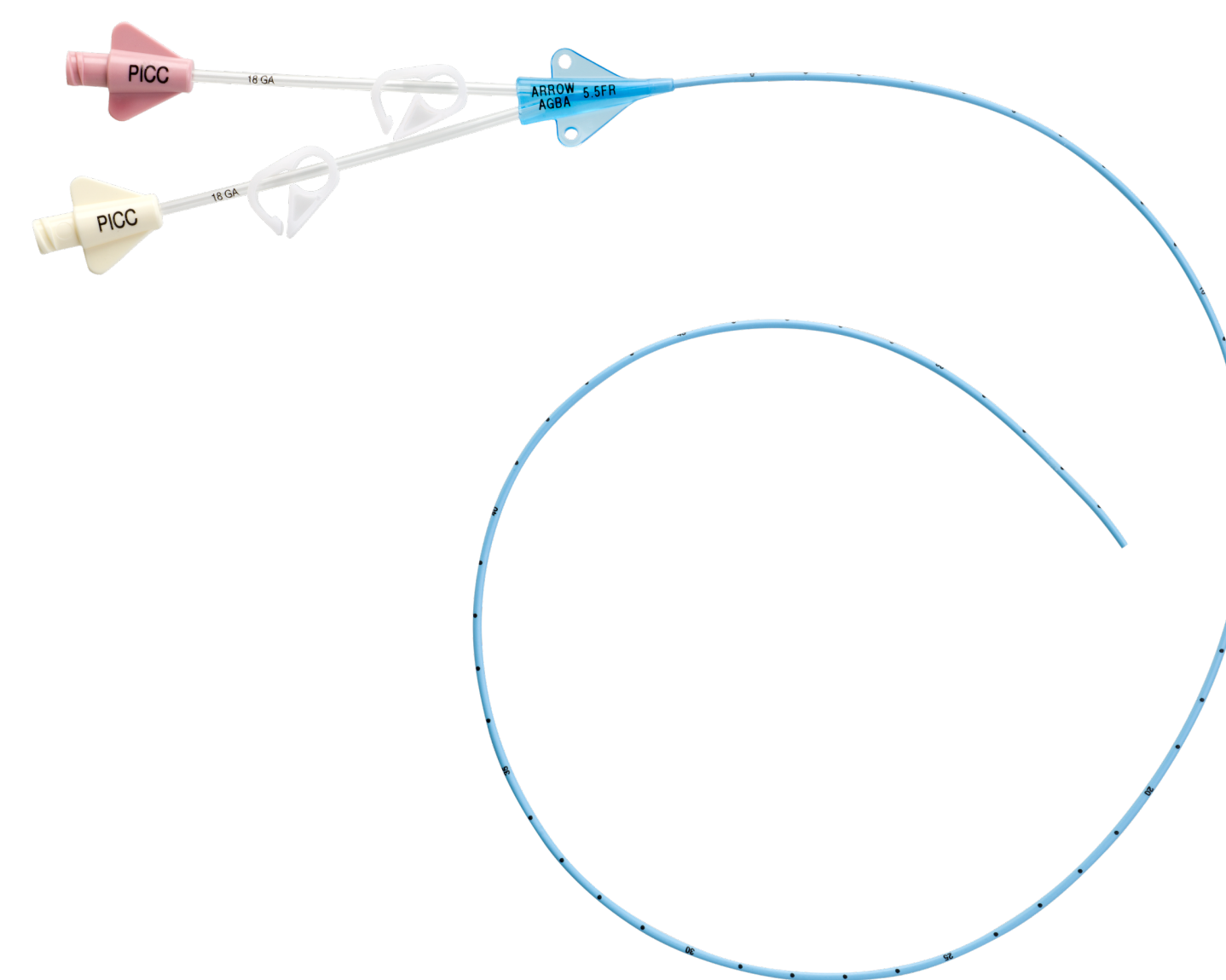
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Background and Objectives

Arrowg+ard Blue Advance™ (AGBA) Pressure Injectable Peripherally-Inserted Central Catheters (PICC) are treated with antimicrobial (AM) and antithrombogenic (AT) agent—chlorhexidine. They are indicated for short-term or long-term vascular access for patients requiring central venous access. To meet EU Medical Device Regulation requirements, a study examining the safety and performance of these PICCs when used for adult and pediatric patients was conducted.

Methods and Materials

- Primary endpoint was successful completion of treatment using the AGBA PICCs (Teleflex, Morrisville, NC, USA) without elective removal due to complications/adverse events (AE).
- Secondary endpoint was the rate of specific AEs.
- Study protocol was reviewed by a central IRB and determined to be exempt from consent/continued review.
- The study was conducted in US, UK, Spain and Italy by clinicians collecting data for consecutive cases in which device was used within the previous 30 days.



Results (Index Study: Adults and Pediatrics)

- For index study (adults and pediatrics) investigators at 49 sites collected data for 316 cases in which the AGBA PICCs were used; 55% male and 78% adult patients
- Duration of use ranged from <1 day to 731 days (mean 46±77 days)
- Successful use without removal due to complications/AEs in 91% of cases
- 11% cases with potentially device-related AEs: occlusion (17), suspected infection (12), phlebitis (2), arrhythmia (1), exit site infection (1), skin inflammation (1); also:
 - One confirmed CRBSI (0.3%, 0.07/1000 catheter days)
 - One reported case of anaphylaxis (0.3%)
- Pressure injection of contrast media performed in 65 cases without incident.

Results (Pediatric Subset)

- Pediatric subset included cases from index study and additional cases from Phase II pediatric-only data collection (N=175)
- Duration of use ranged from <1 day to 253 days (mean 24±42 days)
- Successful use without removal due to complications/AEs in 90% of cases
- 10% cases with potentially device-related AEs: occlusion (8), suspected infection (5), occlusion and suspected infection (2), occlusion and phlebitis (1), suspected infection and phlebitis (1), hematoma (1)
 - No confirmed CRBSI, thrombus, or anaphylaxis reported
- Pressure injection of contrast media performed in 65 cases without incident.

Limitations

- Observational study; no control group
- Data not monitored
- Findings not necessarily applicable or restricted to specified cohort, such as in an RCT

Conclusions

- This real-world evidence study of AM/AT treated PICCs showed positive outcomes for adult and pediatric patients
- Performed as intended with few AEs, including one confirmed CRBSI and one anaphylaxis
- Observed outcomes included sustained catheter dwell, successful pressure-injectable use, and a low frequency of device-related adverse events.
- Findings support continued use of AM/AT PICCs in routine clinical practice under approved indications.