

Psychological Impact of Central Venous Catheters in Patients on Home Total Parenteral Nutrition (HPN)

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INTRODUCTION & OBJECTIVES

- Background: Central Venous Catheters (CVCs) are life-sustaining for HPN, but their psychological burden is under-studied.
- Research Gap: Evidence specifically tailored for HPN patients is scarce compared to oncology.
- Study Aim: To investigate the impact of CVCs on patient quality of life and healthcare delivery.

METHODS & SAMPLE

- Design: Mixed-method qualitative study including systematic review and survey.
- Sample: 34 HPN patients (from FILO and A.N.N.A. associations).
- Tool: Validated QASICC questionnaire.
- Scope: Measuring acceptance, emotions, daily activities, limitations, and satisfaction.

KEY RESULTS & STATISTICAL DATA

- 59%: CVC acts as a constant reminder of their illness.
- 50%+: Frequent fear of CVC damage or device malfunction.
- 75.5%: Global Mean Satisfaction Score (QASICC Scale).
- Gender: Women report significantly greater body image distress.
- Age: Younger patients (≤ 60 years) show poorer device acceptance.



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CONCLUSIONS

- Distress: The CVC causes significant psychological distress despite its vital utility.
- Limitations: Difficulty prevailing in social activities and intimacy.
- Fear of Failure: Device malfunction fear is a primary patient concern.
- Adaptation: Coping improves over time, but early targeted support is crucial.

CLINICAL RECOMMENDATIONS

1. Psychological Support: Integrate counseling into standard HPN care protocols.
2. Education: Specific coaching on CVC management and coping (pre/post-implant).
3. Multidisciplinary Teams: Include psychologists and social workers.
4. Shared Decision-Making: Active patient involvement in CVC device selection.

