Complications of central venous port systems in tumour patients: data from a rural cancer centre



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BACKGROUND

- Totally implantable port systems are recommended for prolonged central venous access in tumour patients.
- Implementation of guidelines for suspected catether related in clinical practice is a challenge for the clinician.
- Data regarding complications of venous port systems in the ambulatory setting are lacking.
- The Landshut Network for Oncology and Palliative Care Medicine aims to improve cancer care and palliative care service with regard to the special needs of the rural cancer population.

METHODS

- We conducted a retrospective cohort study in our centre.
- All charts of tumour patients in whom the central venous port system was explanted in 2010 were reviewed and analyzed regarding the reasons for removal and risk factors for catheter-related infections.

RESULTS

- In 2010, 56 central venous port systems were removed from tumour patients at the Krankenhaus Landshut-Achdorf (number of implanted systems in 2010: 215).
- Of the 56 patients 90% had a solid tumour and 10% a hematologic malignancy.
- The mean patients' age was 61±13. 64% of patients were women.
- Reasons for removal of the port system were suspected catheter related blood-stream infection (38%, n=22), patients' wish (30%), dysfunction (9%) and local complication (5%).
- Characteristics of patients with suspected blood stream infection are shown in Fig. 2.





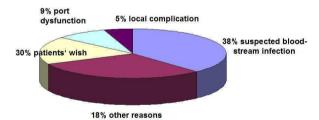
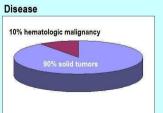


Fig. 1: Reasons for port removal

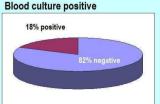
Fig. 2: Patients with suspected blood-stream infection (n=22):













CONCLUSIONS

- > Suspected catheter related blood-stream infection in solid tumour patients is a common reason for removal of central venous-port systems.
- > Due to the low patient number we could not identify specific risk factors for catheter related infections yet.
- > We propose the initiation of a prospective study documenting data for the removal of central port systems in suspected catheter-related infections in the ambulatory setting.
- > Based on the prospective data the practicability of the existing guidelines should be tested.



