SEVEN YEARS OF EVOLUTION OF THE INTRAVENOUS THERAPY TEAM AT THE “HOSPITAL UNIVERSITARIO DONOSTIA”

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INTRODUCTION

The constitution of the intravenous therapy team (ITT) in 2011 implied an awareness of the complications related to the PICCs (Peripherally inserted central catheter), such as deep vein thrombosis (DVT) and catheter-related bacteremia (CRB), that were treated without unified professional criteria.

In this context, important collaborations are established with different health professionals and it is the starting point of our project "Intravenous Therapy Team Management Support Group" (ITT-MSG), which is very beneficial for both, patients and professionals, as for the hospital and the community in general.

METODOLOGY

- Establishment of inter-hospital circuits.
- Creation of protocols for the management of PICC thrombosis and suspected infection.
- Creation of a database to collect information: medical history, analytical data, characteristics of the catheter and complications.

RESULTS

- Increase in the number of inserted PICC per year (Graph 1)

- Improvement in the catheters global maintenance.
- Reduction of unnecessary withdrawals.

- Reduction of complications related to PICC (Graph 2)

Rate for 1000 days	2016	2017
PICC-related Bacteremia	1,2	1,1
Thrombosis	2,3	1,3

Graph 2

(*) Not measured

- Creation of a Committee of vascular accesses in which they participate: Interventional Radiology, General Surgery, Infectious Diseases, Medical Oncology, Preventive Medicine, Anesthesia, Evidence-Based Medicine, Home Hospitalization, Primary Care, Expert in Research Methodology in Health Sciences and ITT.

CONCLUSIONS

The creation of the ITT-MSG has achieved a comprehensive and individualized assistance covering the entire process from the insertion, monitoring and withdrawal of vascular accesses optimizing the management of resources. This is reflected in the increase of annual implantations of PICC, which went from 164 in 2011 to 1088 in 2017, and in the reduction of the number of DVT (6.1% in 2011 to 1.9% in 2017) and CRB (1.9% in 2015 to 1.7% in 2017).

Robust data on the activity and needs of the ITT have been obtained, which aim to prevent or reduce complications and offer a quick and effective solution.

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