

Intravascular Catheter-Related Infections: A Clinical Focus on Prevention, Diagnosis & Treatment (Acta Biomedica Lovaniensia, 299)



In modern-day medicine, the use of intravascular catheters has become unavoidable. In the United States, hospitals and clinics purchase more than 150 million intravascular devices each year of which more than 5 million are central venous catheters (CVC). They are used for the administration of medication (antibiotics, chemotherapy), fluids and nutrition and for haemodialysis. Venous as well as arterial catheters (AC) also have become indispensable for the continuous monitoring of vital parameters in the intensive care unit (ICU). However, their use does not come without risk. It puts patients at danger for iatrogenic mechanical, thrombotic and, most importantly, infectious complications.

Catheter-related infection (CRI) can have serious consequences by inducing catheter-related bloodstream infection (CRBSI) with an important increase in morbidity and sometimes mortality. The magnitude of the problem is immense (an estimated 250,000 CVC-associated bloodstream infections per year in the USA alone). After several decades of clinical experience with the use of intravascular devices many unanswered questions still remain regarding the prevention, diagnosis and treatment of CRI. The intention of the research described in this manuscript was to answer several of these questions. In a first phase, based on our clinical experience and an extensive literature review, an attempt was made to extract some of the clinically more relevant questions. Six of them were retained through the design of 4 clinical trials and a literature analysis answers were sought after.

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