

primary studies - published, non RCT

Home intravenous therapy using a silastic long line catheter in cystic fibrosis patients.

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Study design (if review, criteria of inclusion for studies)

Controlled study of silastic long IV line compared with short IV line.

Participants

34 participants with CF (2 positive sweat tests) an acute pulmonary exacerbation requiring IV therapy. Age range: 4-20 years.

Interventions

Half of the participants were allocated to the silastic long line group.

Outcome measures

Mean line life in the long IV line group was 16.76 days (SD 4.44) versus 2.66 (0.62) days in the short IV line group. 6 long IV lines had complications. The number of complications in the short IV lines group was not reported. No episodes of bacteraemia.

Authors' conclusions

silastic long lines are superior to conventional cannulas in terms of patient tolerance, reduction in the number of hospital admissions, reduction in the number of repeat venepunctures/cannulations and reduction in local complications. The high degree of patient acceptability has been impressive and has increased with the enthusiasm of children with cystic fibrosis for more frequent intravenous therapy.

<http://www.mrw.interscience.wiley.com/cochrane/clcentral/articles/471/CN-00255471/frame.html>

See also

Irish medical journal YR: 1992 VL: 85 NO: 3

Keywords

Anti-Bacterial Agents; pharmacological_intervention; Catheterization- Central Venous; Catheterization- Peripheral; Intravenous; Continuous; non pharmacological intervention - devices OR physiotherapy; Bacterial Infections; Respiratory Tract Infections; Respiratory Tract Diseases; Infection; Exacerbation; Pseudomonas aeruginosa; Pseudomonas; Home;