Transhepatic vascular access in pediatric cardiology patients with occlusion of traditional central venous sites.

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Abstract

Central venous access in pediatric patients with complex congenital heart disease may be difficult. Percutaneous transhepatic access offers an alternative for patients with occlusion of traditional central venous sites. We reviewed our experience utilizing transhepatic access in 10 consecutive pediatric cardiology patients for central venous lines, cardiac catheterization and endomyocardial biopsy.
Central venous catheters (CVCs) refer to prolonged vascular access devices indicated for the administration of intravenous medication treatments, fluids, or total parenteral nutrition, repeated blood sampling, and for hemodialysis (HD) [1, 2]. Annual CVC exposure in hospital intensive care units has been estimated to total 15 million days [3] in the United States. Characteristics of patients with central venous and hemodialysis catheters.*