

Prevenzione e Trattamento delle Complicanze Meccaniche

Dr Maurizio Pacilli, MBBS (Hons), MD (Research), FRCS (Paed Surg)

Paediatric Surgeon, Monash Children's Hospital

Senior Research Fellow, Monash University

Nothing to disclose



Complicanze Meccaniche – Malfunzionamento

Peri-operative (2-30%)

- Puntura dell'arteria
- Ematoma
- Tamponamento cardiaco
- Pneumotorace
- Emotorace
- Embolismo
- Etc.

Complicanze Meccaniche – Malfunzionamento

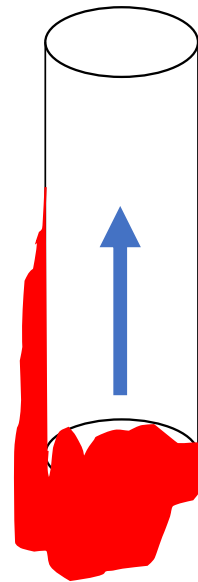
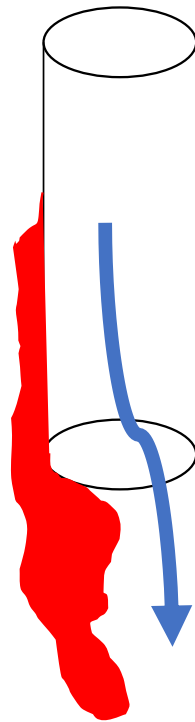
Tardive

- Occlusione - Persistent Withdrawal Occlusion (PWO)
 - Guaina fibroblastica
 - “kinking”
 - “Taglio obliquo” della punta
 - “pinch-off” syndrome – compressione tra clavicola e prima costola
- Dislocazione (tip migration)
- Danni meccanici
 - Rottura
 - Port disconnesso dal catetere

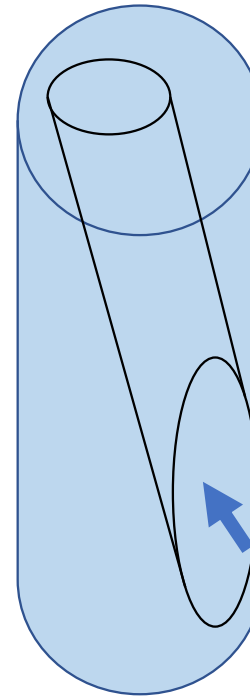
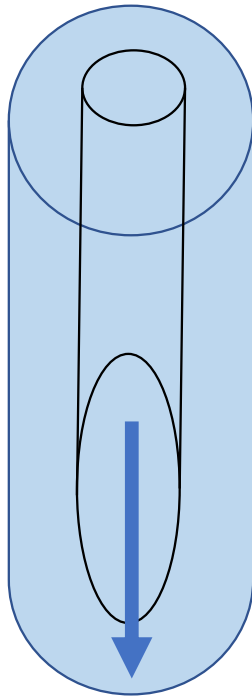
Segni e Sintomi

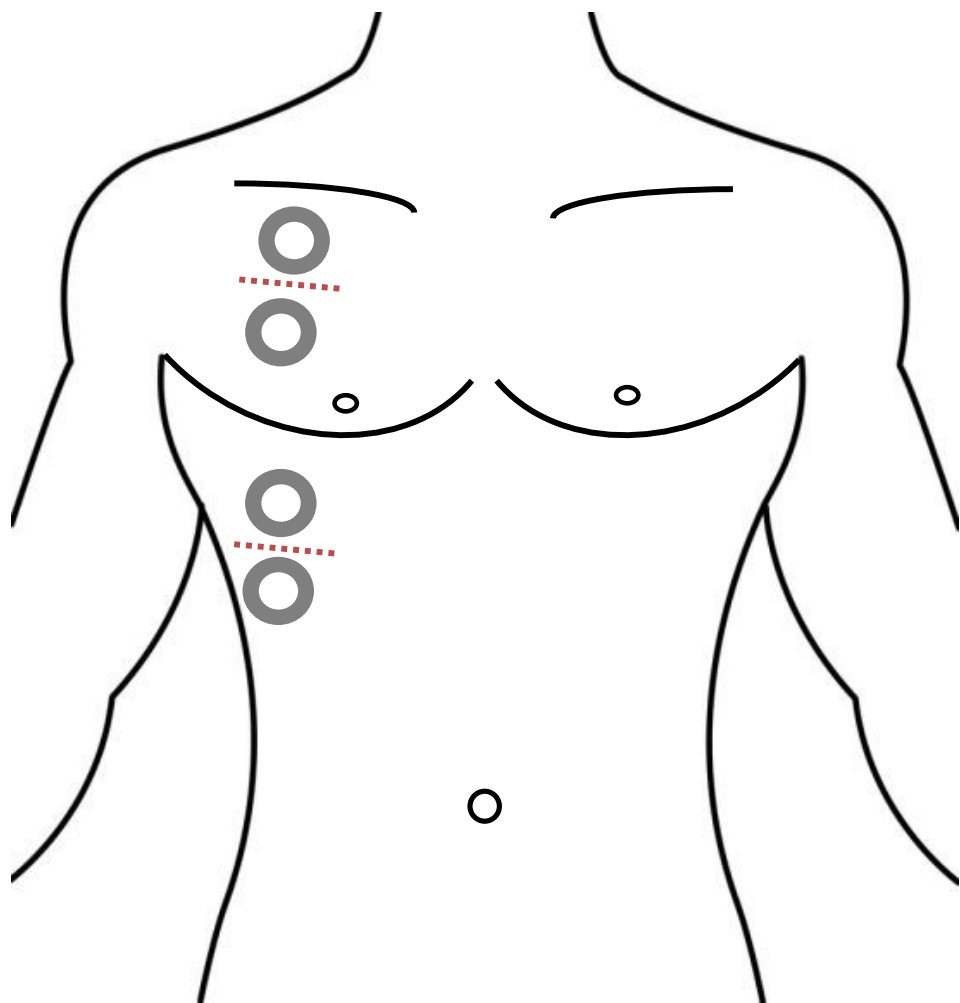
- Impossibilità di aspirare/iniettare
- Dolore durante l'utilizzo
- Edema
- Eritema
- Aritmie cardiache
- Tamponamento cardiaco
- Pneumotorace
- Emotorace

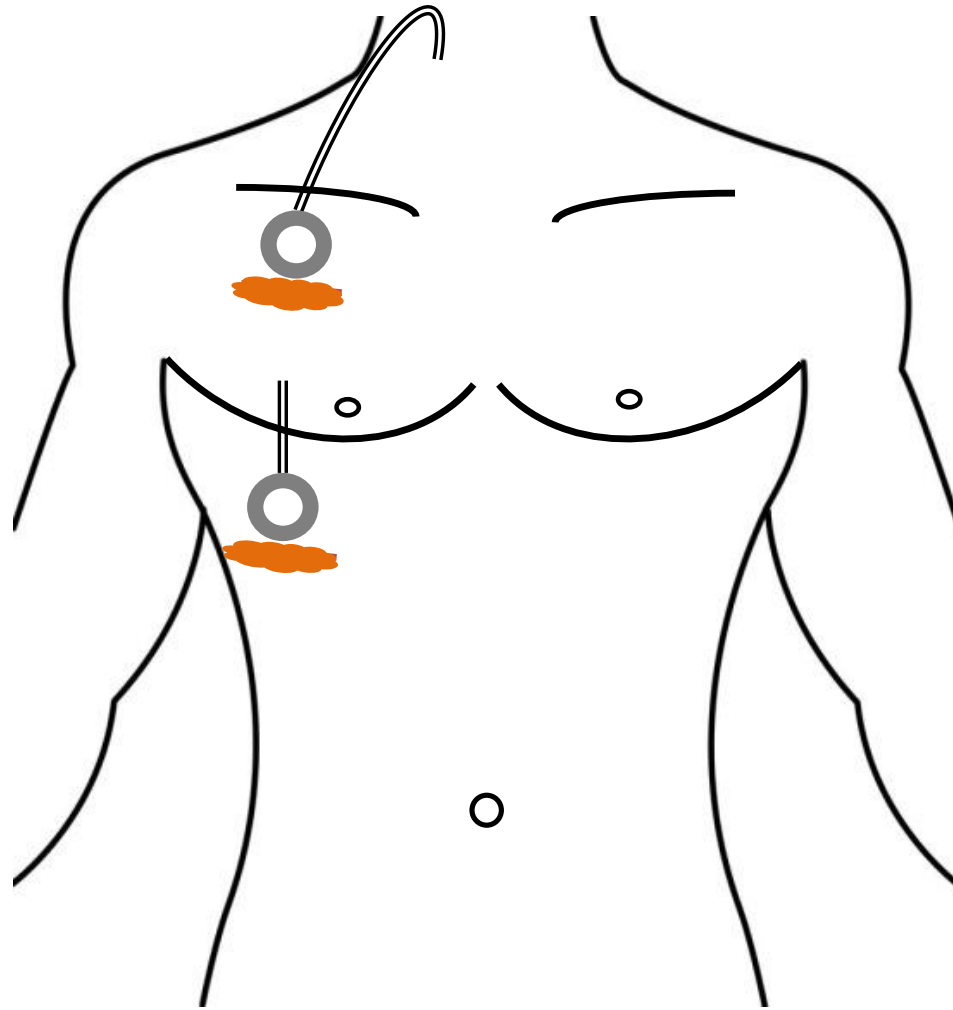
Complicanze Meccaniche – guaina fibroblastica



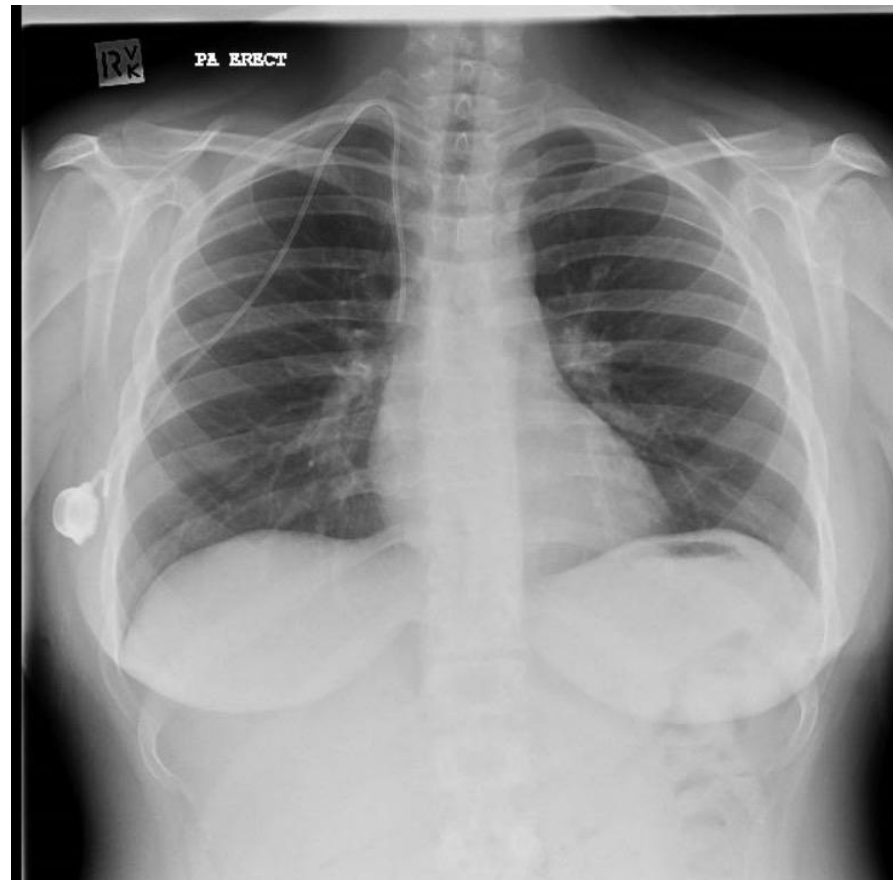
Complicanze Meccaniche – taglio obliquo



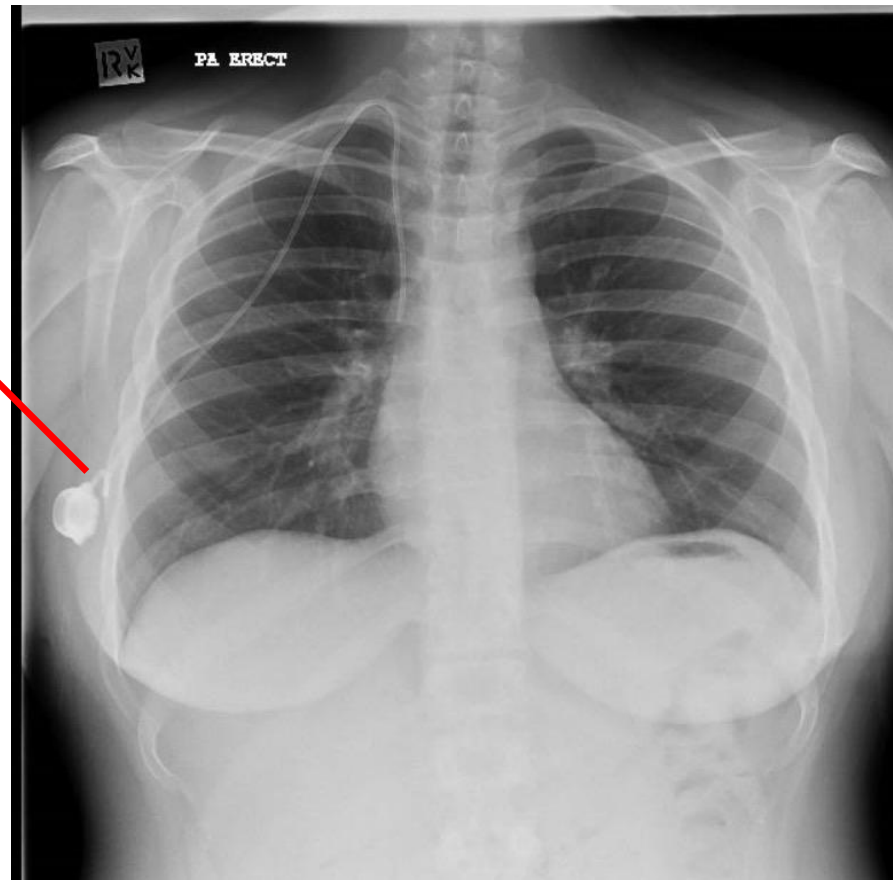




Paziente di 16 anni



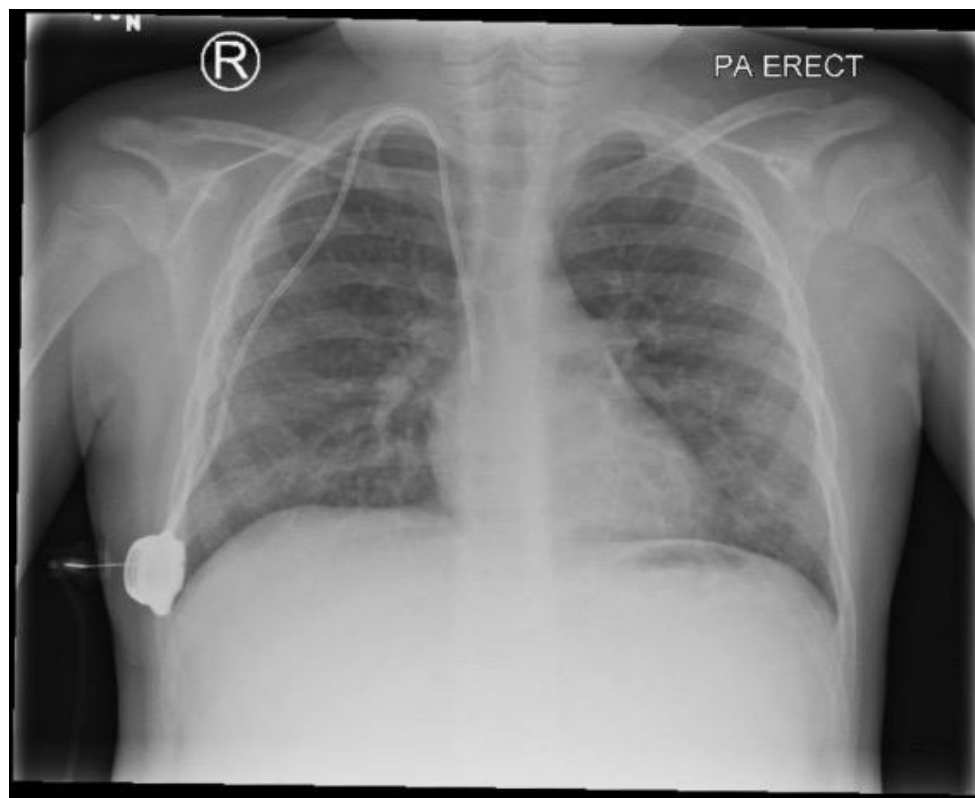
Paziente di 16 anni



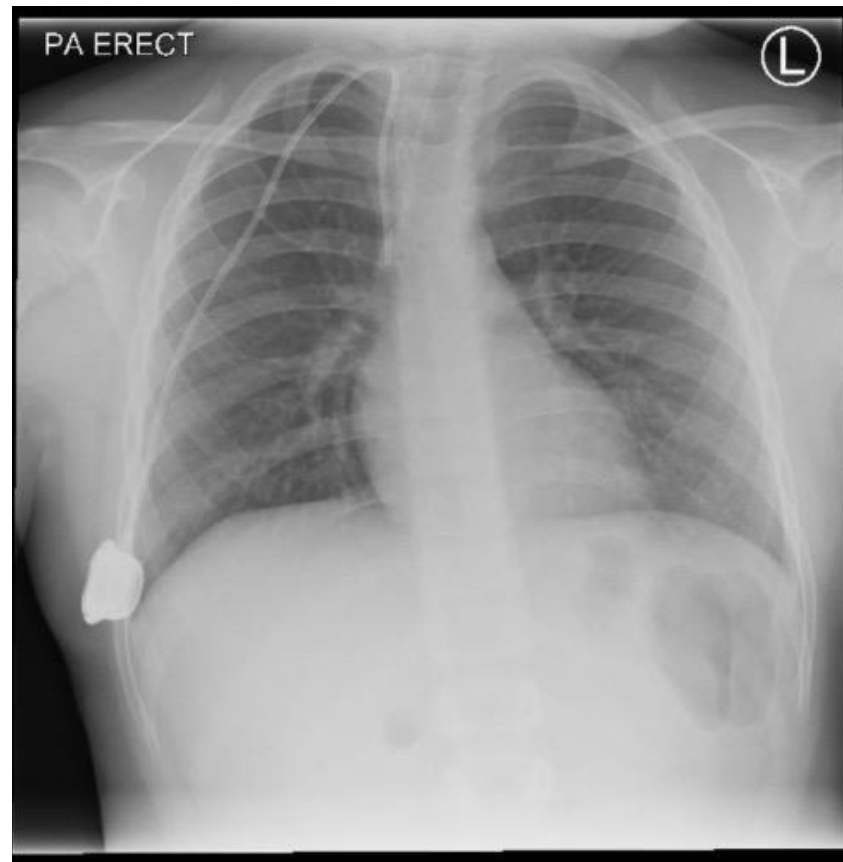
...2 mesi → sutura riassorbibile (Polyglactin 910)



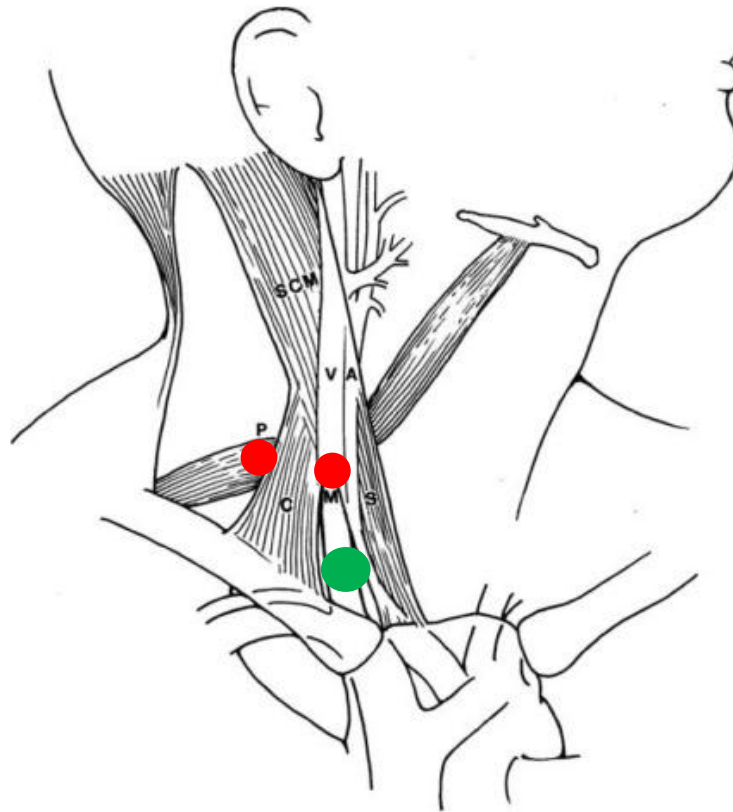
Bambino di 7 anni - 1 mese



...10 mesi → Unica sutura al polo inferiore (Polypropylene)

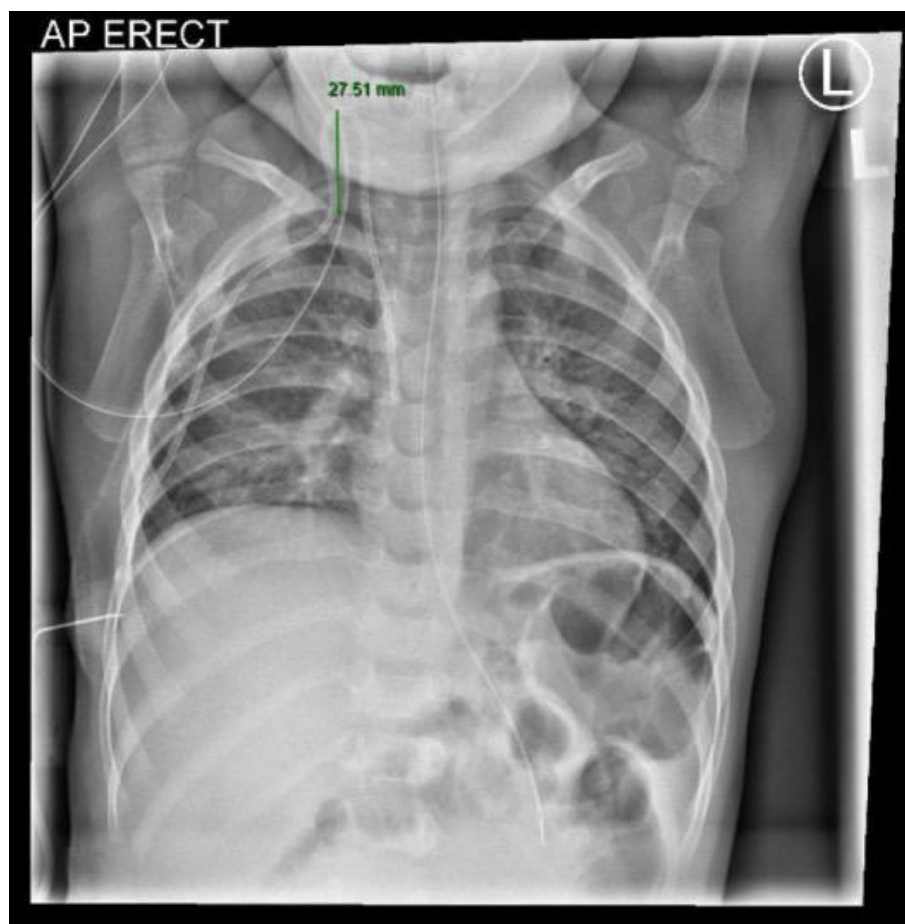


Puntura della vena giugulare interna

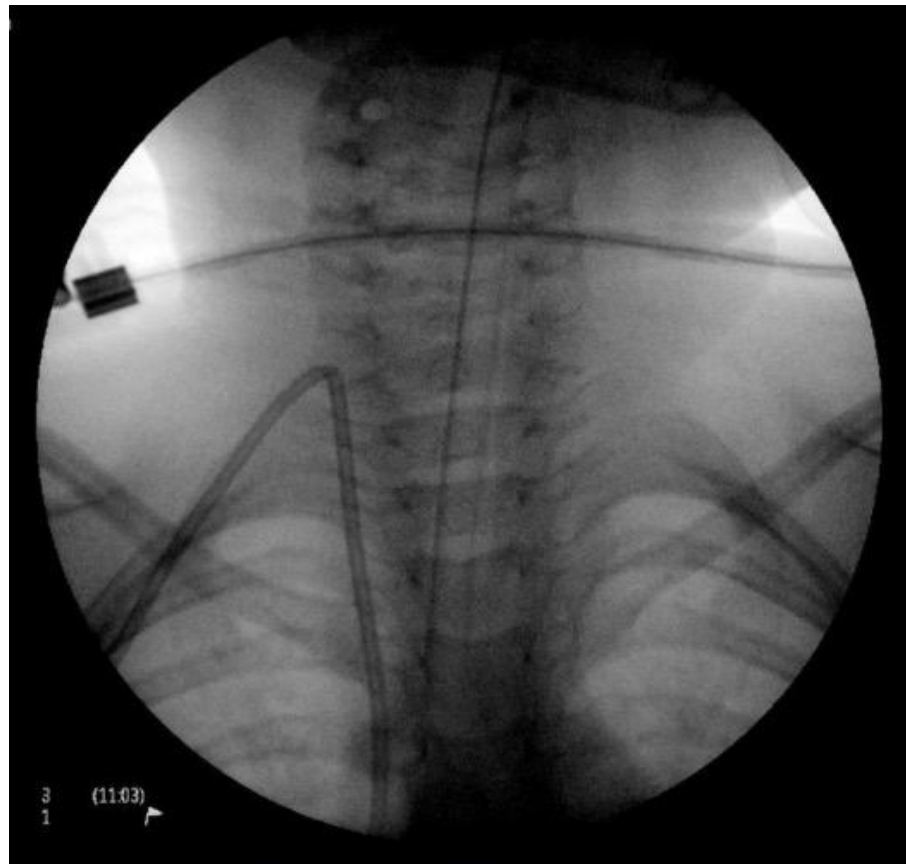


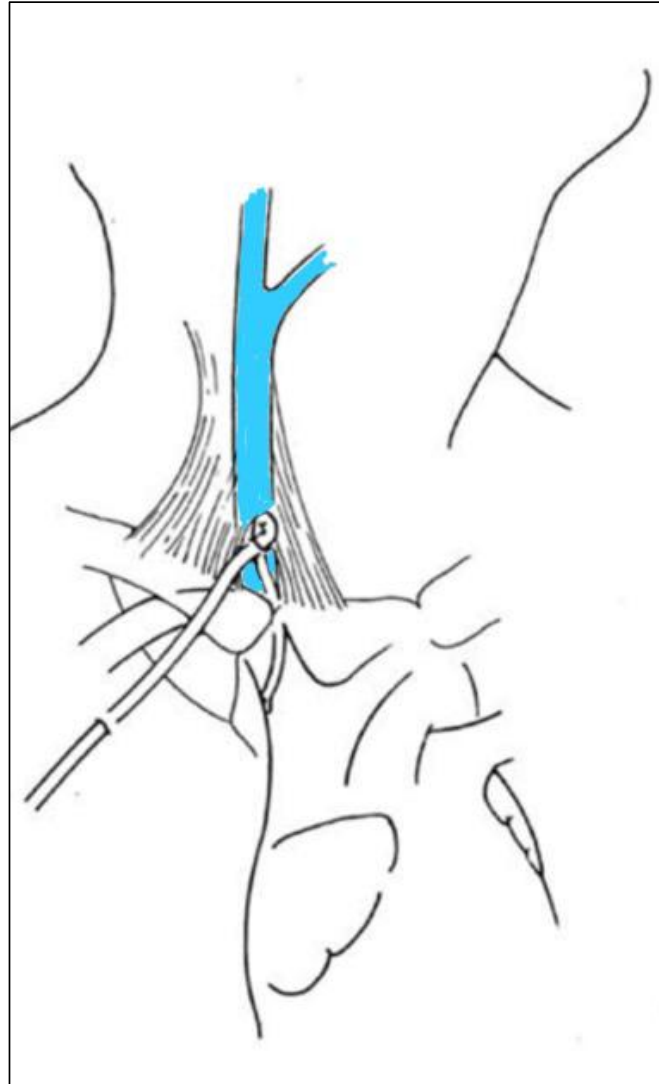
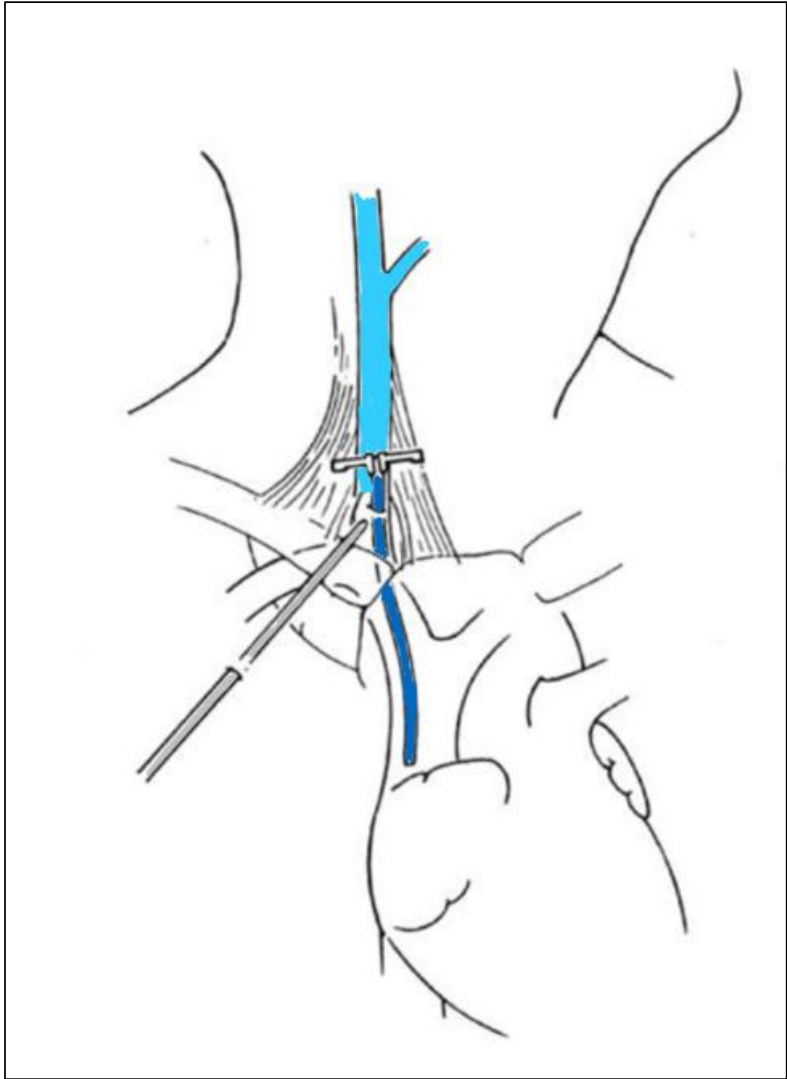
Modified from Peters et al, 2003

Bambino di 2 anni – Occlusione intermittente



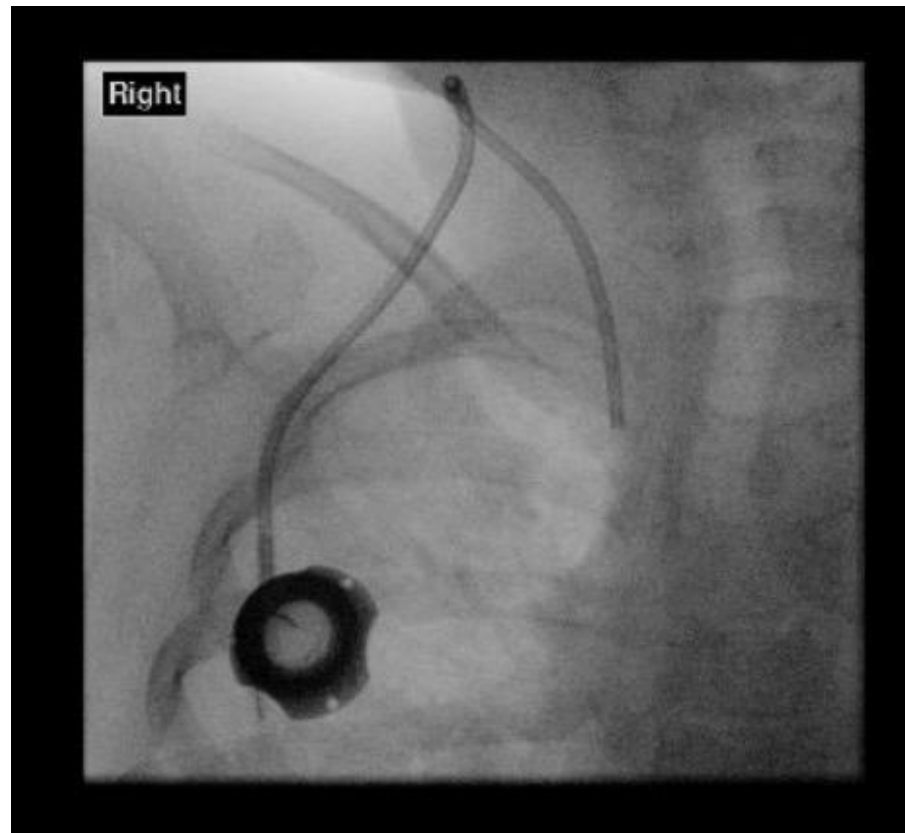
Bambino di 7 anni – Occlusione intermittente



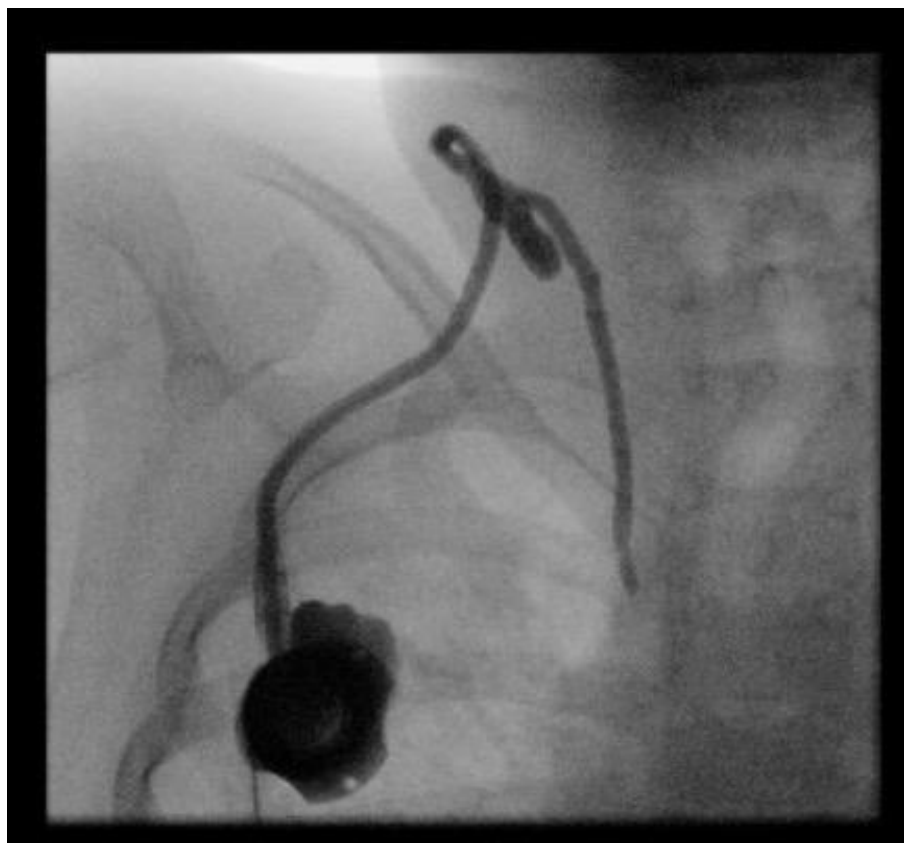


Modified from Peters et al, 2003

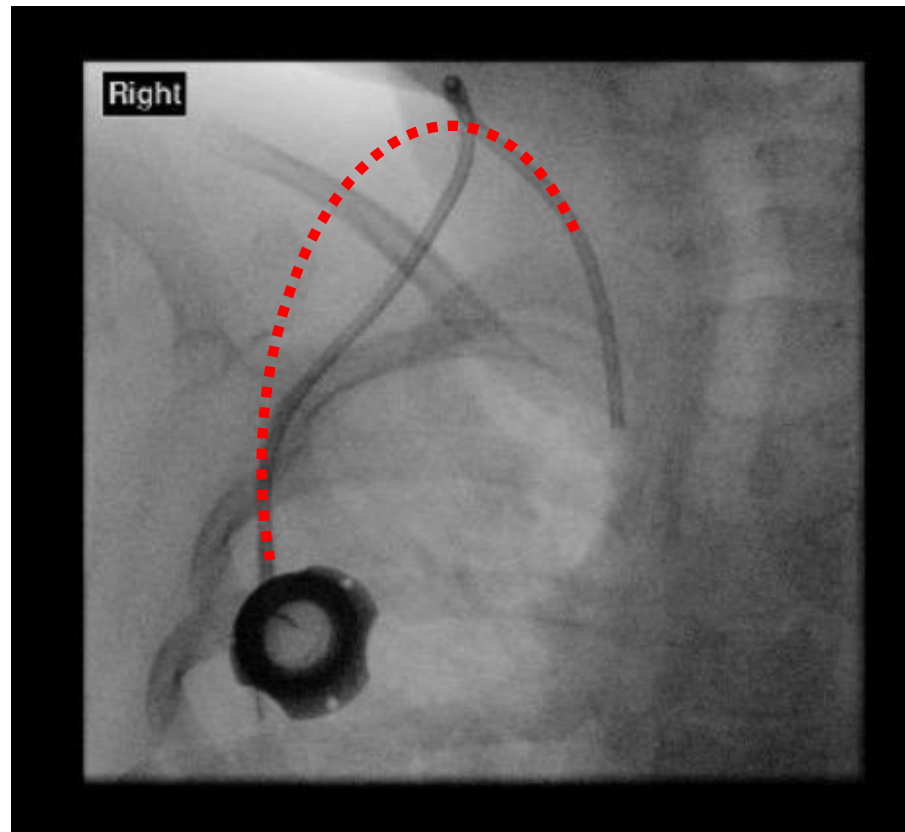
Bambino di 5 anni – Occlusione intermittente

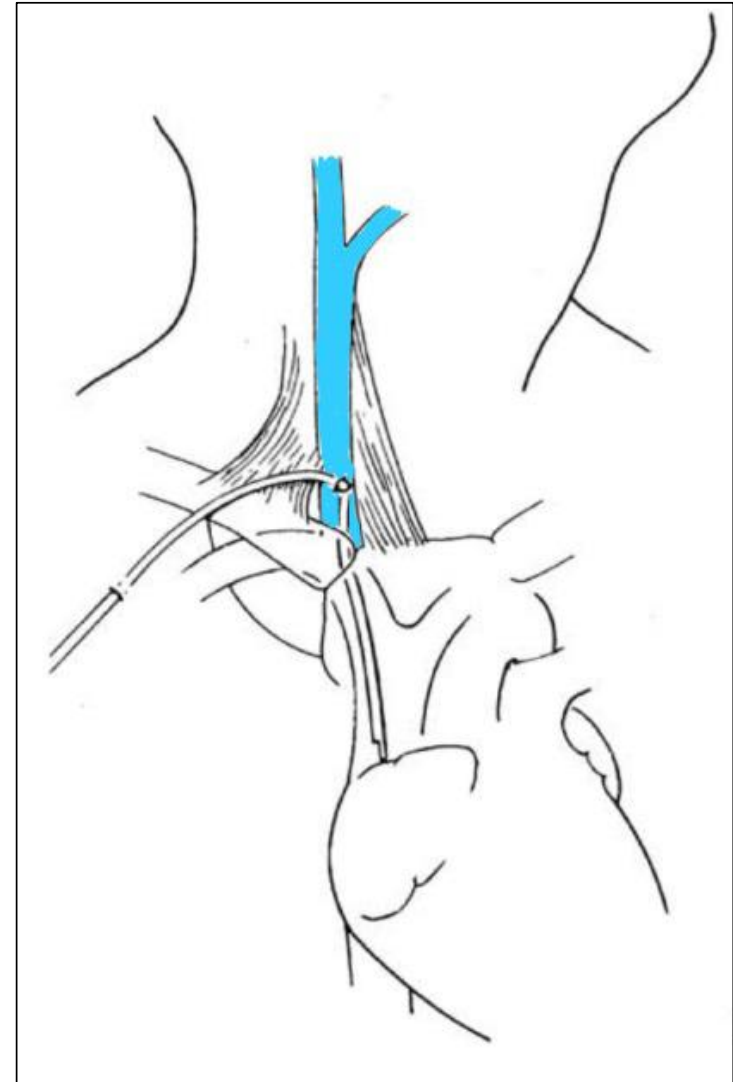
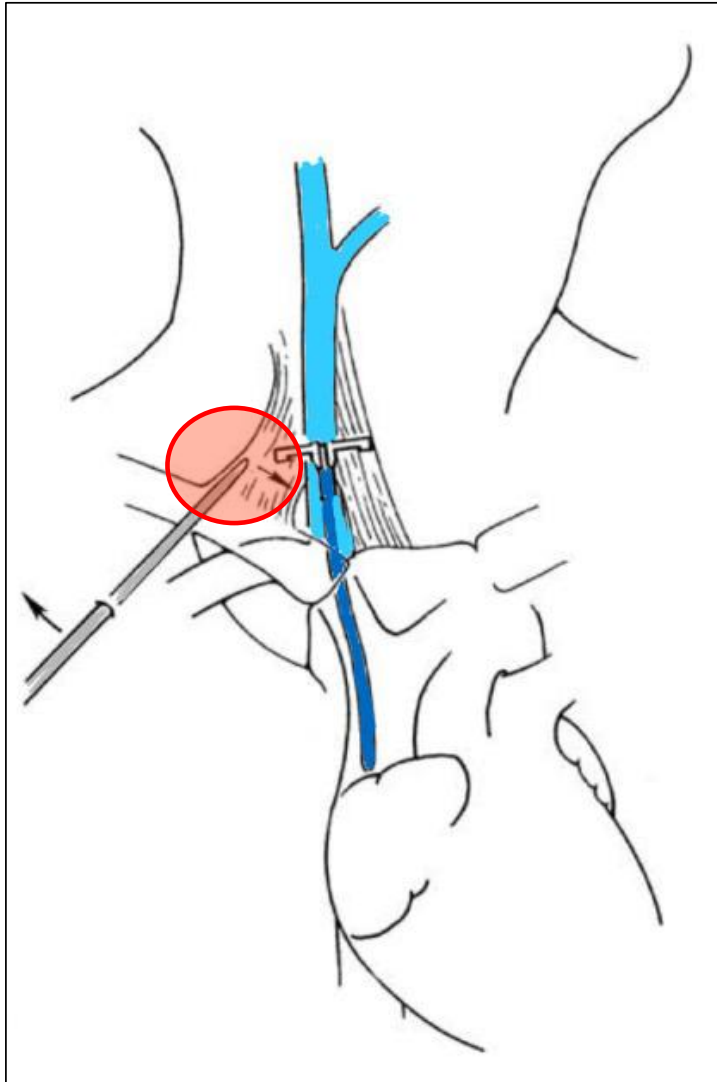


Bambino di 5 anni – rottura



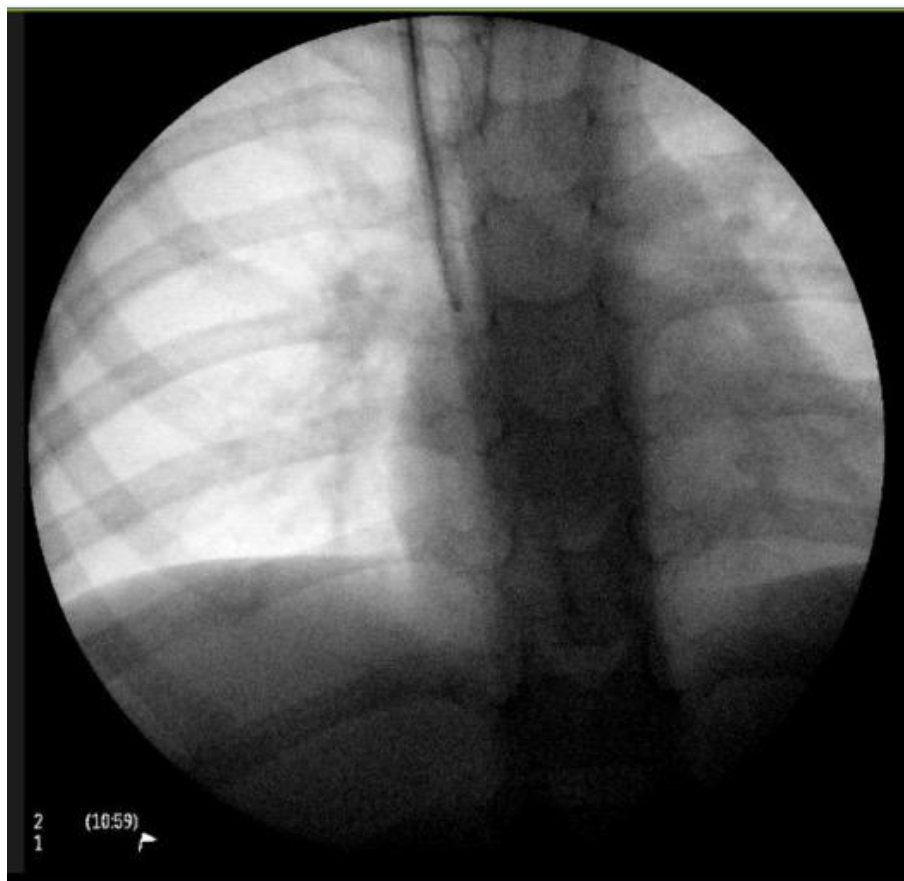
Bambino di 5 anni – Occlusione intermittente





Modified from Peters et al, 2003

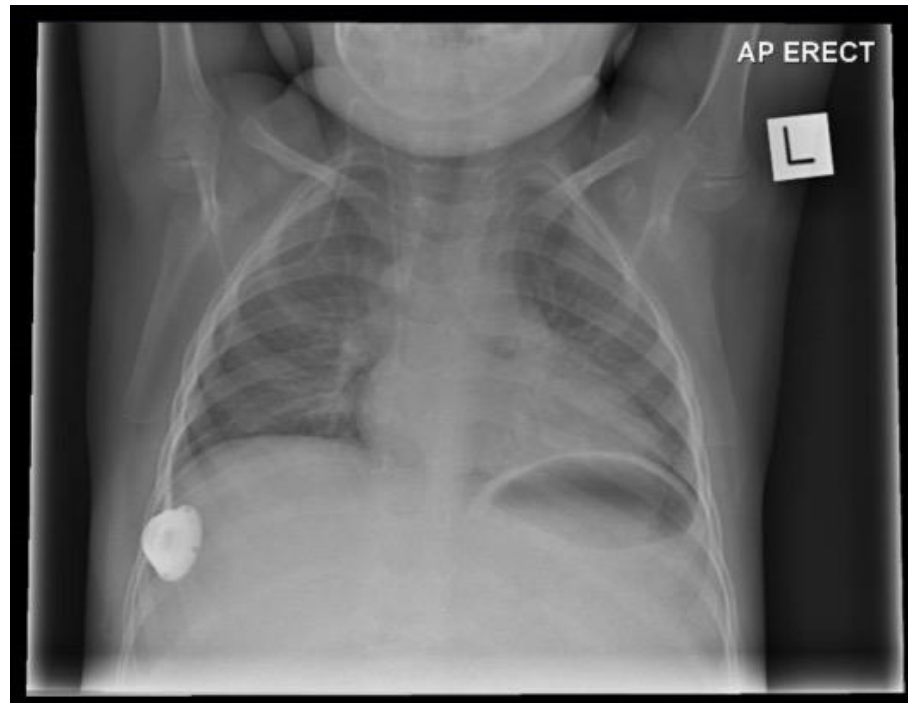
Bambino di 4 anni – Malposizionamento



Bambino di 4 anni – Malposizionamento



Bambino di 3 anni – Inserzione



...3 mesi



...4 mesi



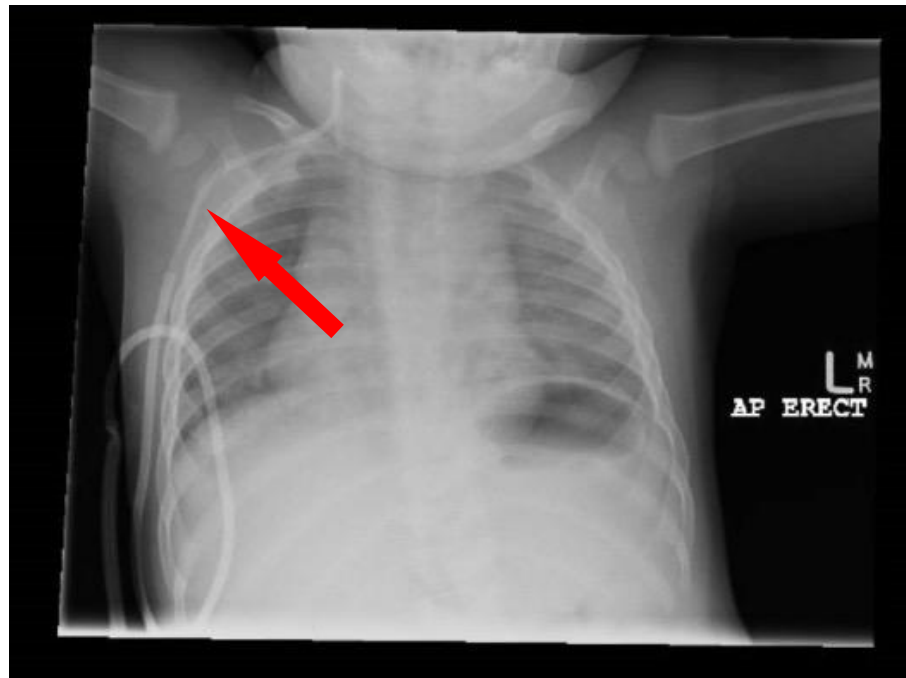
...6 mesi



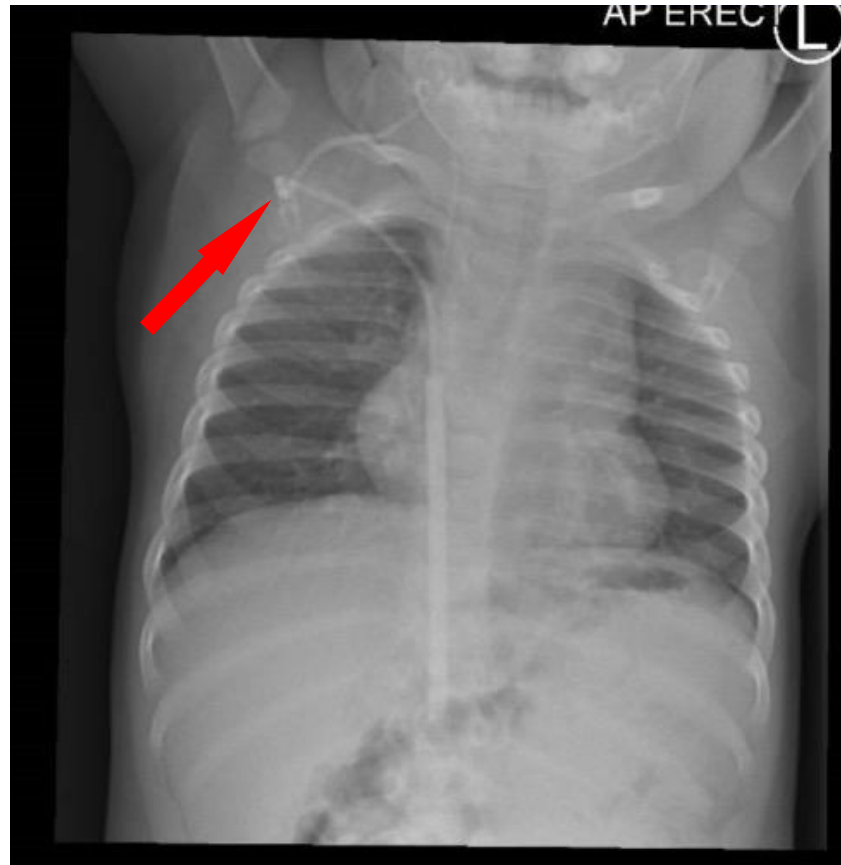
Bambino di 4 mesi – Malposizionamento

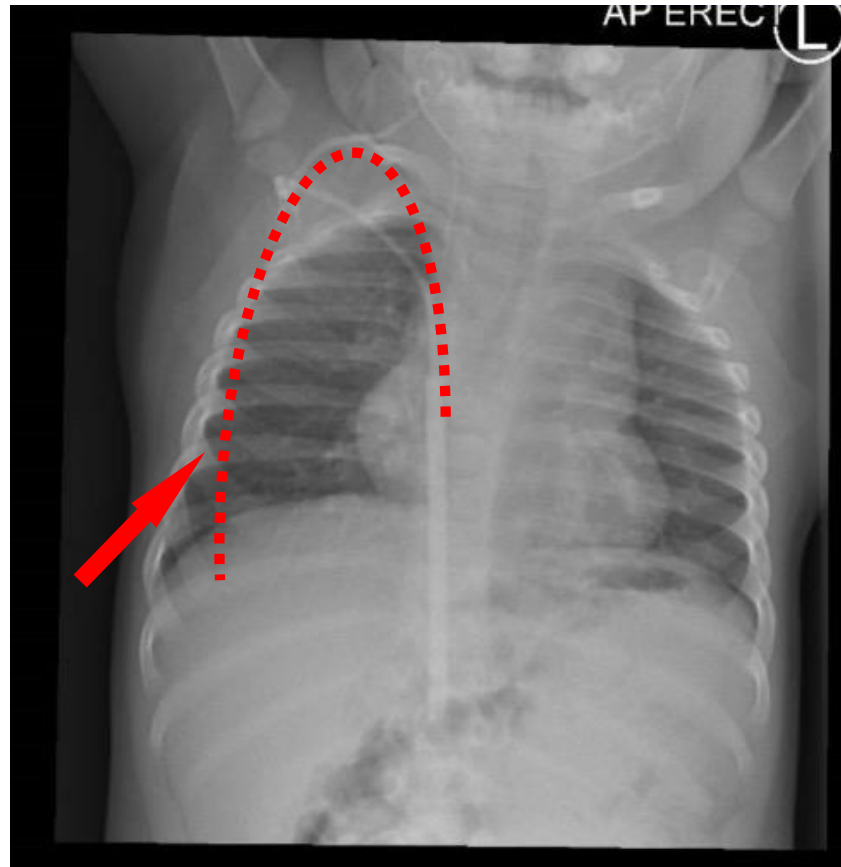


Bambino di 6 mesi – Malposizionamento

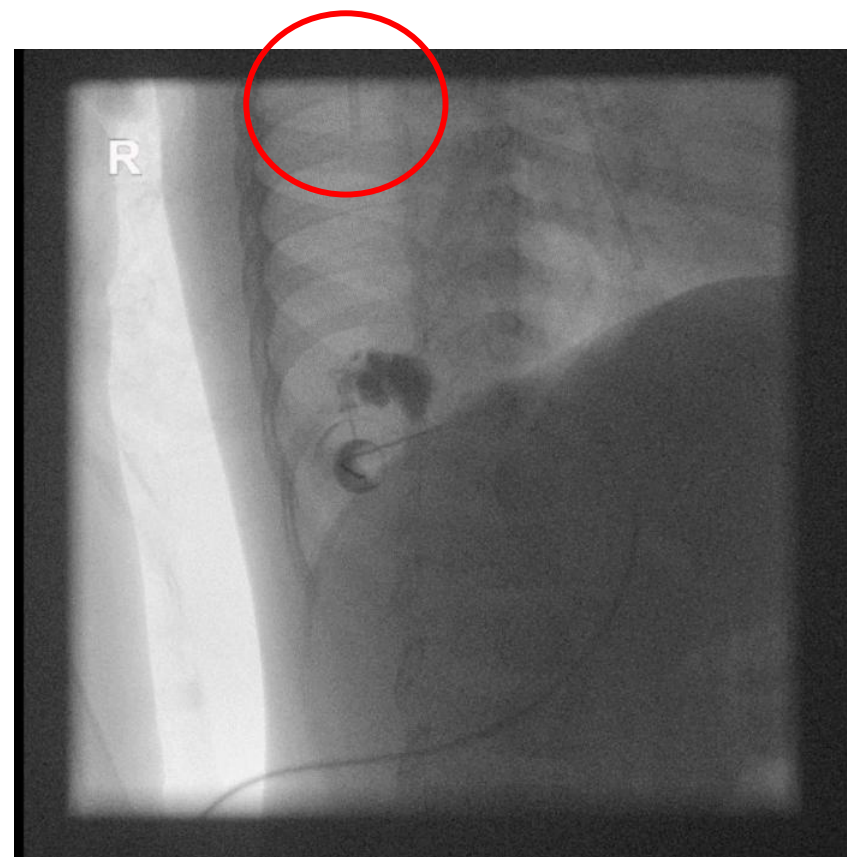


Bambino di 1 anno – Malposizionamento





1 anno dopo inserimento – port non-pre-assemblato



In sintesi

- Evitare puntura alta nel collo
- Creare una tasca laterale all'inserzione
- Utilizzare suture non-riassorbibili
- Utilizzare almeno 2 punti di sutura per il port
- Assicurarsi della corretta connessione tra port e catetere