

ABSTRACT NO. 10

PORT-A-CATH PLACEMENT WITHOUT FLUOROSCOPY IN 790 PATIENTS

*Monohan D, Spector SA, LoMenzo E, DeGennaro V, Iglesias A
Miami VA Healthcare System and the University of Miami, FL

Port-a-cath are traditionally placed in order to provide an effective and stable mode to administer chemotherapy. Port-a-caths are usually placed with the assistance of intraoperative imaging consisting of real time flouroscopy in order to confirm proper positioning of the catheter. The use of flouroscopy requires additional time, equipment and personnel as well as exposure to radiation. We have retrospectively reviewed our experience with a flouro-free port implantation system (Smiths Medical, St. Paul, MN) performed on a general surgery teaching service at a VA Hospital. From Oct 1999 to Dec 2007, 790 flouro-free port-a-caths were placed at the Miami VA Healthcare System. All ports were placed in the operating room under local anesthesia \pm sedation. 776 of the 790 ports (98.2%) were able to be placed without the use of flouroscopy. In seven patients (0.88%), flouroscopy was used and these patients required real time wire guidance to facilitate placement. There were an additional 7 patients who had an unsuccessful port placement (0.88% failure rate). The average OR time was 45 minutes. Immediate complication included pneumothorax in 3 patients (0.3%) and one misplacement of the catheter in an extravascular position. 8 patients (1%) underwent exploration of the port within 30 days for suspected infection. One had a seroma drained and port left in place. In 7 patients, the ports were removed, but only 2 were culture positive. During the same period of time, 132 ports were removed of which 14 were malfunctioning requiring replacement during the same procedure, (all more than 4 months from surgery). Placement of port-a-caths without the use of flouroscopy is accurate and safe and provides an advantage in a system where there is competition for resources. In addition, there was an overall acceptable complication rate in a teaching service.