

The Incidence of Central Venous Catheter Related Deep Venous Thrombosis Detected by Routine Doppler Despite of Adequate Prophylactic Anticoagulation in Critically Ill Patients.

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ملاحظات

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Abstract

Introduction: In our study we aimed to determine the prevalence and risk factors that make the incidence of central line associated deep venous thrombosis increase. **Materials and methods:** This descriptive study was conducted on 80 critically ill patients with inserted central venous catheter. Venous duplex was done before 5th and 10th day of central venous catheters insertion. **Results:** The incidence of thrombosis was 22.5% (18 cases); 61.1% (11 cases) of them developed at 5th day and 38.9% (7 cases) developed at 10th day of using central line. There was higher incidence of thrombosis in patients with presence of malignancy (38.9%) with risk ratio 7.25 (bladder cancer was associated with the most significant high risk of catheter related thrombosis), autoimmune disease (27.8%) with risk ratio 7.5, patients with chronic kidney disease (27.8%), and shocked patients on vasopressors (55.6%). There was higher incidence of thrombosis among patients with Mahurkar insertion (35.7%) versus (15.3%) among patients with central line insertion with P: .05. **conclusion:** Central venous catheter related thrombosis is a frequent complication that occurs frequently, affecting about 1 quarter of ICU patients. Most cases occur as early as 5 days with increasing frequency over days. Mahurkar catheters carry more risk of thrombosis than central venous line catheters. Malignancy and autoimmune diseases have the higher risk of thrombosis, as well as shock and chronic kidney disease.