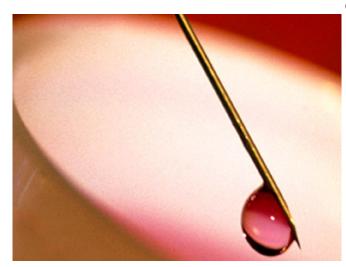


Thin-walled needle best for subclavian catheterization

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complication rate compared with the catheter group (5.8 versus 15.5 percent; P = 0.001). The groups had similar overall insertion success rates (97.1 and 92.7 percent, respectively; P = 0.046), although the needle group had a higher first-pass success rate (62.0 versus 35.4 percent; P

"We recommend the use of a thin-walled introducer needle technique for right-sided infraclavicular subclavian venous catheterization," the authors write.

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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(HealthDay)—A thin-walled introducer needle is recommended for right-sided infraclavicular subclavian venous catheterization, with lower catheterization-related complication rates and higher initial and overall success rates of catheterization compared with a catheter-overneedle technique, according to a study published online July 11 in *Anaesthesia*.

E. Kim, from the Catholic University of Daegu in South Korea, and colleagues compared the incidence of catheterization-related complications and insertion success rate for thin-walled introducer <u>needle</u> and catheter-over-needle techniques in patients requiring right-sided subclavian central venous catheterization. Four hundred fourteen patients were randomized to a thin-walled introducer needle <u>technique</u> (208 patients) or catheter-over-needle technique (206 <u>patients</u>).

The researchers found that the needle group had a significantly lower catheterization-related



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