



Your skin-tunnelled catheter

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Information for patients

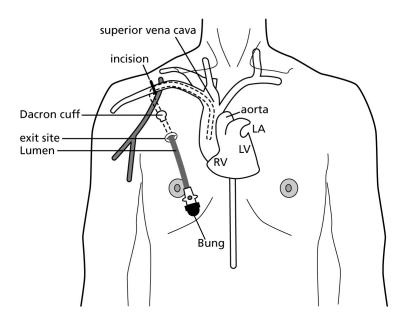
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What is a skin-tunnelled catheter?

A skin-tunnelled catheter is a thin flexible tube that is inserted under skin of your chest into a vein. It is designed to make it easier to give intravenous medication, such as chemotherapy, as well as blood products and other fluids. It also allows us to take blood for testing. It is sometimes referred to as a Hickman line.

The skin-tunnelled catheter enables patients such as yourself, who require treatment over a long period of time, to receive this treatment without the need for repeated injections into the veins, or hospital inpatient stays.

The space in the middle of the tube is called the lumen. Skin-tunnelled catheters can be single or double lumen. You will be able to tell which type you have by the number of tubes visible on the outside (although there is only one on the inside). If you can see two tubes you have a double lumen. The choice will depend on the reason why you have had the catheter inserted.



Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk



How is a skin-tunnelled catheter inserted?

The skin-tunnelled catheter is inserted by a specially trained doctor or nurse, under local anaesthetic.

The length of time that it takes to insert a skin-tunnelled catheter varies greatly from patient to patient, but is usually between twenty and thirty minutes.

The skin-tunnelled catheter will be inserted into a large vein in the neck or chest and tunnelled under the skin with an exit site over the upper chest (see diagram). Once the catheter is in place, your incisions at the insertion and exit site will be stitched, your catheter flushed, and dressings applied.

You will have a chest X-ray two to three hours later, and this will enable us to identify if there has been any complication during the insertion of the catheter.

Arrangements will be made to remove the stitches at the insertion site. This usually takes place between seven and ten days after the catheter has been inserted.

The exit site will have only one or two stitches and these are usually removed after 21 days, although your doctor may decide to leave these stitches in place for longer.

What are the risks?

As with all procedures, these is a small risk of complications arising either while the catheter is being put in or afterwards.

These include:

- **Pneumothorax** (commonly known as a collapsed lung): it is possible that the needle used to access the vein may puncture the lung, causing the lung to partially collapse. This is very rare.
- **Bleeding:** putting a skin-tunnelled catheter in can cause bleeding and bruising, particularly if your blood does not clot very well. The nurses and doctors will observe you for any signs of bleeding.
- **Thrombosis**; it is possible that you will get a thrombosis (blood clot) in your vein. If you notice that your neck or arm swells, you will need to contact the hospital, and arrangements will be made for you to see the hospital doctor. You will need to have a scan to see if there is a blood clot. If a blood clot is found you will be given daily injections to dissolve the clot, and you will need to have the catheter removed and a new one inserted.
- **Infection:** some patients are at increased risk of getting an infection because they have had chemotherapy or other treatments. The nursing staff will teach you how to care for the catheter and tell you how to spot signs of infection.

How long will I need the catheter for?

Again, this varies greatly from patient, and depends upon the treatment that you are to receive and the general state of your health. Once inserted, the skin-tunnelled catheter can remain in place for several months, or even years, if it is looked after properly.

The catheter requires simple but **strict** care to ensure that it remains patent (not blocked) and to prevent it from becoming infected. Your nurse will teach you or your carer how to care for your skin-tunnelled catheter at home.

It is up to you how involved you get in the care of your skin-tunnelled catheter. However, you will need to know how to keep the catheter clean and how to spot any problems with it.

Care of your skin-tunnelled catheter

Flushing your skin-tunnelled catheter

To make sure that your catheter does not become blocked, it will need to be flushed at weekly intervals using saline, then heparin sodium. Heparin sodium is a saline solution containing a small amount of heparin, an anticoagulant that prevents unwanted clots of blood forming in the catheter. If clots form these can cause a blockage in your catheter.

While you are in hospital, every time it is used, your catheter will be flushed afterwards. When you are at home and the catheter is not being used, it will only need to be flushed once a week. The ward will arrange for your district nurse or practice nurse to do this. When you go home from the hospital, you will be given enough equipment to last for a week. After this supplies will be arranged by your practice nurse or district nurse.

Always ensure that you have a good supply of necessary equipment at home. The equipment should be kept in a cool dry place, out of reach of children and pets.

If the district nurse or practice nurse has difficulty flushing your catheter they should contact the hospital for advice, using the numbers at the back of this leaflet.

Clamping your skin-tunnelled catheter

You must always ensure that your catheter remains clamped. The clamp should only be applied over the reinforced area of plastic on the catheter. It is important to use different places to clamp along this area of plastic, in order to prevent general wear and tear.

Care of the catheter exit site

Before you leave hospital with your newly inserted skin-tunnelled catheter, your nurse will teach you or your carer how to check for signs of infection.

When you leave hospital, the exit site will be dressed with a suitable dressing. Once the site has healed, you can cover the site with a suitable dressing, or leave it without a dressing whilst at home. The ward will arrange for your district nurse or practice nurse to redress your catheter once a week.

The catheter should be attached to your skin by either a special 'skin-fix' device or a piece of clean tape. This is to try to prevent accidental pulling on the catheter.

How will I know if my catheter is infected?

The following are signs of a possible infection:

- excessive oozing from the exit site
- redness around the exit or insertion site
- swelling around either site
- pain
- a temperature above 37.5°C or if you feel unwell (for example, if you develop 'the shakes') immediately after the catheter has been flushed.

If you notice any of the above you must contact the hospital for advice, using the numbers at the back of this leaflet.

Frequently asked questions

What should I do if my catheter becomes split or cut?

This is very unlikely to happen, but if it does you must phone the hospital immediately to arrange to come into hospital.

In order to protect your skin-tunnelled catheter, please keep any sharp objects well out of the way. Do not use scissors anywhere near the lumen.

What should I do if the bung becomes loose or disconnected?

You should replace the bung immediately, after cleaning the end of the catheter with a chlorhexidine and alcohol swab. If you have not been shown how to do this you should telephone the ward.

What will happen if I leave the bung off the catheter and forget to clamp the lumen?

This could be a very dangerous situation, as the pumping action of the heart can cause air to be drawn into your bloodstream.

Will having the catheter affect my sex life?

There is no reason why your skin-tunnelled catheter should interfere with your sex life. Before starting any activity though, ensure that your catheter is taped securely to your skin to reduce the risk of damage to either you, your partner or your catheter.

Can I bath or shower?

Unless your doctor has advised you not to, you should shower or bathe daily, if you feel able.

It is important that you do not have Jacuzzis, saunas or steam baths due to the potential risk of infection.

Contact numbers

If you have any concerns or questions about your skin-tunnelled catheter after your return home, please telephone us on the most appropriate number from below:

24-hour Emergency Helpline 0808 178 2212

(7 days per week)

Chemotherapy Suite 0116 258 6107

(Monday to Friday 9:00am to 4:30pm)

Osborne Day Care 0116 258 5263

(Monday to Friday 9:00am to 5:00pm)

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہِ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔ علی هذه المعلومات بلغةٍ أُخری، الرجاء الاتصال علی رقم الهاتف الذي يظهر في الأسفل જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

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If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk

