

Factors related to the success of endovascular therapy with plain old balloon angioplasty of central vein stenosis in haemodialysis patients

Akhmadu Muradi, author

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Abstrak

Introduction: Central venous stenosis (CVS) or occlusion is a severe complication in hemodialysis patients, which significantly decreases the patency of all vascular dialysis access components, including arteries and branches, AV anastomosis, peripheral veins, and central veins. The main etiology of CVS is mostly secondary to the placement of temporary or permanent dialysis catheters in the subclavian vein, internal jugular vein, and femoral vein. Standard endovascular therapy for central venous stenosis is conventional balloon angioplasty. **Method:** This is a retrospective study using medical records from June 2013 to August 2018. Patients who underwent plain old balloon angioplasty (POBA) procedures in the CVS condition due to the installation of hemodialysis catheter access were included in this study. The analysis was performed to assess the characteristics and data distribution of each variable. **Results:** Significant factors related to the success of endovascular procedure in patients with central venous stenosis with POBA were the onset of clinical symptoms (<3 months; $p < 0.001$), duration of catheter placement (<2.5 months; $p < 0.001$), history of previous catheter placement (no more than once, $p < 0.001$), initial stenosis (<80; $p < 0.001$), and diameter of POBA (10 mm; $p < 0.001$). **Conclusion:** Some factors influenced the success of the POBA procedure for overcoming CVS. The need to understanding the use of hemodialysis catheter access according to the guideline is important.