

14th International Conference on
INFECTIOUS DISEASES, PREVENTION AND CONTROL
March 21-22, 2019 Dubai, UAE

The relationship between vascular access infection and fatal spontaneous vascular access haemorrhage

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Background: End stage renal disease managed with haemodialysis requires vascular access commonly in the form of an arteriovenous fistula, arteriovenous graft or central venous catheter. Arteriovenous fistula and graft creation is associated with significant morbidity and mortality. Complications include thrombosis, stenosis, infection and haemorrhage.

Literature Review: A literature review was performed using the Pubmed, Embase, Medline and CINAHL electronic databases from inception to December 2018 to identify cases of vascular access infection and fatal spontaneous vascular access haemorrhage amongst haemodialysis patients with an arteriovenous fistula or graft. These cases were examined to identify the relationship between vascular access infection and fatal exsanguination.

Conclusion: Fatal spontaneous vascular access haemorrhage is a rare, yet preventable complication of haemodialysis that is not extensively described in the literature. Further research is required to enable more comprehensive risk profiling and develop optimal prevention and management strategies.

Biography

Brianna Twomey is doing her Master of Surgery in University of Sydney, Camperdown. She graduated in University of Melbourne in 2016. She has Professional Surgical skills in Australian and New Zealand.

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