

Hickman Line insertion

Your consultant has asked for you to have a Hickman Line inserted. This is a fine silicone tube (catheter), which is inserted under local anaesthetic into a vein in the neck or chest. Your treatment can be given through the Hickman Line once it is in place.

If you are taking **Warfarin or Clopidogrel** (Plavix) please telephone the Royal Derby Hospital on 01332 783215.

What are the risks, consequences and alternatives associated with having a Hickman Line inserted?

Most procedures are straightforward, however as with any procedure there is a small chance of side-effects or complications and these include:

- Bruising at the insertion site.
- A leak of air from the lung due to puncture with the needle (pneumothorax). This occurs in less than 2% of patients.
- The line may become displaced and may fall out in up to 10% of patients.
- Infection of the line. This occurs in up to 25% of patients and may require removal of the line.
- Clotting of the line or of the vein that the line is in. This occurs in up to 10% of patients and may require removal of the line.

If you require further details about these or other possible complications, please contact the radiologist (x-ray doctor) at the Royal Derby Hospital (telephone number as above) before your Hickman Line insertion, or the ward doctor during your stay.

Radiation risks

All x-ray procedures involve some exposure to radiation and so pose a degree of risk. Everyone is exposed to natural background radiation from the environment throughout their lives. One in 3 people will develop cancer at some point in their lives due to many various causes including environmental radiation. Radiation from a medical procedure involving x-rays can add very slightly to this risk. The length and level of exposure to radiation from x-rays in medical procedures is very strictly controlled and is kept to the minimum amount possible.

The added risk of cancer due to this radiation is extremely small. Your doctor has determined that the risk to your health of not having this procedure is considerably greater than the risk from the radiation used.

Alternatives

Your consultant has recommended this procedure as being the best option.

However, the alternatives to this procedure may be a venflon (short plastic tube) inserted into the vein of your hand/arm or a Peripherally Inserted Central Catheter (PICC) which is a fine silicone or polyurethane tube (catheter) inserted into a vein of your upper arm. If you would like more information about this please speak to your consultant or one of the nurses caring for you.

There is also the option of not receiving any treatment at all. The consequences of not receiving any treatment are a possible deterioration in your illness. If you would like more information please speak to your consultant or one of the nurses caring for you.

What happens when I come into hospital?

You will be admitted to a ward in the Royal Derby Hospital either the day before or on the morning of your Hickman Line insertion. Afterwards you may be allowed home the same day after a period of observation.

A member of the consultant's team will see you before the insertion. You will be asked to sign a consent form. Please do not hesitate to ask the doctor or nursing staff any questions you may have.

You should not eat food 6 hours before the procedure and not drink any fluids for 3 hours before the procedure.

If you are diabetic please seek advice regarding your medication from the Combined Day Unit, Ward 303 (Oncology) or Ward 302 (Haematology).

What happens during my Hickman Line insertion?

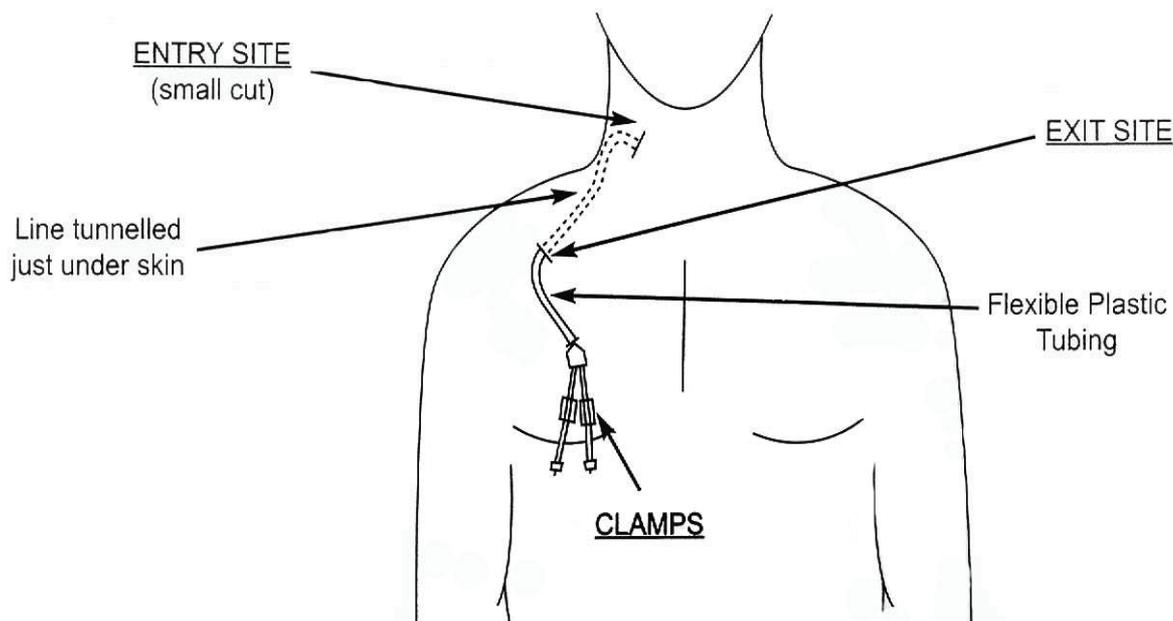
You will be brought to the X-Ray Department from your ward in a wheelchair. The insertion takes approximately ½ hour.

A nurse and radiographer will be with you all the time and can give you any assistance you require. If you have any further questions, please ask the nurse, radiographer or x-ray doctor.

Before the procedure male patients may be asked to shave part of the chest.

You will be asked to lie flat and then will be given an injection (sedation) to make you sleepy. Because of this you will probably not remember much about the procedure. Your neck and upper chest will be numbed with local anaesthetic.

The Hickman Line 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). Stitches are used to secure the line at first, but will be removed a few days later. You will have a dressing over the exit site.



What happens after my Hickman Line insertion?

The position of the line will be checked and if this is satisfactory, you will be taken back to the ward on a trolley. The ward nurse will check your neck/chest at regular intervals for any bleeding or bruising for 1 - 2 hours.

You will need to lie on your bed for 2 hours until the sedative has worn off.

Please ask the nurse for painkillers if you need them.

The nurse will care for the line, give your treatment and change the dressings whilst you are in hospital. Your further treatment will be organised by the ward staff.

The line will not change your degree of mobility and you can continue most of your usual activities. The nurse will tell you about specific activities you should not do because of the line.

Some patients may be able to continue their treatment at home. A district nurse could be asked to do this, or you or a carer might be taught how to look after the line and give the treatment.

If you are able to continue your treatment at home, all the equipment will be arranged for you. An information booklet and instructions will be provided.

Important information following sedation

The sedative drugs remain in your body for 24 hours and during this time are gradually excreted from the body. Therefore there are certain things that you should and should not do.

For the first 24 hours after your procedure you should:

- Ensure that a responsible adult stays at home with you for 24 hours.
- Rest quietly at home for the rest of the day - go to bed or lie on the settee.
- Drink plenty of fluids, but not too much tea or coffee.
- Eat a light diet eg. soup or sandwiches. Avoid greasy or heavy food as this may cause you to feel sick.
- Lie flat if you feel faint or dizzy.
- Contact your GP if you have not passed urine 12 hours after your procedure.

For at least 24 hours after your procedure you must not:

- Drive. Your insurance company may refuse to meet a claim if they feel you have driven too soon.
- Go back to work.
- Operate any domestic appliances or machinery.
- Drink alcohol.
- Make any important decisions or sign any important documents.
- Be responsible for looking after small children.

References

Audit of ultrasound assisted catheter insertion in patients receiving chemotherapy.
Shabbir J *et al.* The surgeon 2005 3;1.

Retrospective analysis of Hickman Line associated complications in patients with solid tumours undergoing infusional chemotherapy.

O'Neill V *et al.*

Acta oncol 1999 38; 1103-07

Venous Access; In Textbook of endovascular procedures (Editor J Dyett *et al* 2000)

Bilbao J *et al.* Cpt 20 ; 244-51

If you have any queries, or require further information
please contact the ward doctor during your stay
or a radiologist at the Royal Derby Hospital on 01332 783215.

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