

Information for patients receiving vesicant chemotherapy through a central venous access catheter such as a peripherally inserted central catheter, or Groshong catheter :

Your cancer treatment includes one or more chemotherapy drugs called vesicants. Vesicants are intended to be given into a vein but for various reasons, they sometimes leak outside of the vein into the tissue and cause tissue damage. The degree of tissue damage that can occur depends on the vesicant (some cause minor tissue damage while other vesicants can cause major damage), the amount of the vesicant that goes into the tissue, and the location on the body where it leaks into the tissue. Central venous access devices, such as PICC lines and Hickman and Groshong catheters help reduce the chance that vesicants will leak from the vein and cause damage to tissues or body organs. In rare instances, however, these devices may break, malfunction, or not work as intended. If this happens, vesicants can possibly leak from the vein into the surrounding area and cause damage.

Your nurse will do everything possible to carefully administer your chemotherapy. You can do the following things to help reduce the chance that a vesicant will leak outside the vein and cause tissue or organ damage:

- Know the name of the IV device that was inserted into your arm or chest area. You may have received a small card with this information and the date it was inserted; if so, carry this card with you. If not, write the name of your device along with the date it was inserted on a piece of paper and carry it with you.
- If you have had any difficulty flushing your catheter at home, let your nurse know. The catheter should flush easily, without resistance. Never use force when flushing your catheter.
- Wear clothes that are comfortable and provide easy access to your catheter on the days you receive chemotherapy.
- When your nurse checks for a blood return and flushes your catheter, focus for just a minute on how this feels to you. If you feel an odd sensation in your neck or anywhere else, let your nurse know.
- Your nurse should obtain a blood return from your catheter. If a blood return does not appear and you are seated upright in a chair or bed, you will be placed in a flat position or in a position with your head slighter lower than the rest of your body. Usually, a blood return can then be obtained. If a blood return still cannot be obtained, your nurse will manage the situation according to the policies of your treatment facility. You may need an x-ray or dye study of the catheter, you might have a small clot at the end of your catheter that needs to be dissolved, or you may need to have something else done. Your nurse will tell you what needs to be done and why. For your safety, a vesicant chemotherapy drug is not given unless your nurse confirms that your catheter is in the right place and functions correctly.
- As you receive a vesicant, tell your nurse right away if the catheter site or surrounding area feels uncomfortable, painful, itchy, or in any way unusual. Let your nurse know as soon as your catheter site starts feeling differently. Do not wait to see if the symptoms continue or worsen.
- If you are receiving fluids or a vesicant by IV infusion (dripping in from a bag), make sure that the IV tubing is taped to your arm and place it across your lap instead of having it hang off the side of the bed or chair. If your tubing is accidentally pulled or tugged, let your nurse know immediately so your catheter can be checked.