Background

- Heart failure affects > 5 million people in the United States.
- > 250,000 suffer from end stage disease.
- Left ventricular assist devices provide a valuable option for patients.
- Driveline infections significant source of morbidity and mortality.
- Variability in infection control practices.
- No national guidelines and limited evidence.

Purpose

To determine if the frequency of exit site dressing changes is related to the incidence of driveline infection in hospitalized, adult patients.

Methods

- Retrospective medical record review at an urban medical center.
- Between August 2008 and September 2013, 86 patients implanted with HeartMate II® (HM II®) LVAD.
- Sixty-eight met study eligibility.
- INTERMACS criteria for driveline infection were used to define infection.
- Sample was divided into 3 dressing change frequency groups.
- Statistical analysis done for total sample population and frequency groups.

Results

- No evidence of driveline infection was found.
- Daily dressing change group was younger in age compared to the weekly group (p=0.005) and three times a week group (p=0.001).

Discussion

- Age difference among the daily group: FDA approval of the HM II® for destination therapy in 2010.
- Driveline infections do not appear to be related to the frequency of dressing change in adult patients with a newly implanted LVAD.
- Less than daily dressing changes reasonable.
- At the study organization, weekly dressing changes a reasonable option.
- More research on driveline dressing change frequency and driveline infection needed.

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Doctoral Project Committee Chair
Meg Bourbonniere, PhD, RN
Doctoral Project Committee Member
Kristen Carlin, MPH
Biostatistician
John W. C. Entwistle III, MD, PhD
Doctoral Project Committee Member