

- Digestive Cancers and Implantable Venous Catheter Infections

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General

Identification

Detailed name Digestive Cancers and Implantable Venous Catheter Infections

CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) authorisation 908152

General Aspects

Medical area Gastroenterology et hepatology

Health determinants Iatrogenic

Keywords central venous catheter, Assessment, impact, incidence, infection, mortality

Scientific investigator(s) (Contact)

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Unit Unité CARMENInserm 1060/ Inra 1235 (Equipe 1)

Organization Hospices Civils de Lyon

Collaborations

Funding

Funding status Mixed

Details Prix Société Francophone Nutrition Clinique et

Governance of the database

Sponsor(s) or organisation(s) responsible Hospices Civils de Lyon (HCL)

Organisation status Public

Additional contact

Main features

Type of database

Type of database Study databases

Study databases (details) Longitudinal study (except cohorts)

Database recruitment is carried out by an intermediary A selection of health institutions and services

Database recruitment is carried out as part of an interventional study No

Database objective

Main objective The main objective is to assess the risk factors for central venous catheter-related infections and mortality in 30 days following onset of infection in patients with digestive cancer. The secondary objective is to assess the impact of sarcopenia on central venous catheter-related infections and mortality in 30 days following onset of infection in patients with digestive cancer.

Inclusion criteria Patients over the age of 18 with digestive cancer who have been monitored since March 2007. Patients diagnosed with primary digestive cancer who are receiving intravenous chemotherapy and have a central venous access port in place

Population type

Age Adulthood (19 to 24 years)
Adulthood (25 to 44 years)
Adulthood (45 to 64 years)
Elderly (65 to 79 years)

Population covered Sick population

Gender	Male Woman
Geography area	Local
French regions covered by the database	Auvergne Rhône-Alpes
Detail of the geography area	Lyon
Data collection	
Dates	
Date of first collection (YYYY or MM/YYYY)	03/2007
Size of the database	
Size of the database (number of individuals)	[500-1000[individuals
Details of the number of individuals	525
Data	
Database activity	Current data collection
Type of data collected	Clinical data Declarative data Paraclinical data Biological data Administrative data
Clinical data (detail)	Medical registration
Declarative data (detail)	Face to face interview
Paraclinical data (detail)	The presence of a stoma, cancer site, cancer stage, underlying pathologies, insertion site of central venous catheter (CVC), date CVC was put in place, intra-venous treatment, date and reasons for end of observation
Biological data (detail)	Albumin levels, C-reactive protein (CRP)
Administrative data (detail)	Date of birth
Presence of a biobank	No
Health parameters studied	Health event/morbidity

Health event/mortality
Health care consumption and services

Care consumption (detail)

Hospitalization
Medical/paramedical consultation
Medicines consumption

Procedures

Data collection method

Enrolment date corresponds to date central venous catheter was put in place. Each patient is monitored for a maximum period of 12 months. End of observation criteria are: central venous catheter infection, end of intra-venous chemotherapy, catheter ablation, transfer to another hospital, or death

Participant monitoring

Yes

Links to administrative sources

No

Promotion and access

Promotion

Link to the document

<http://tinyurl.com/Hal-Cancers-digestifs>

Description

List of publications in HAL

Link to the document

[http://www.ncbi.nlm.nih.gov/pubmed/?term=Chambrier+C\[author\]+AND+cancer+AND+catheter](http://www.ncbi.nlm.nih.gov/pubmed/?term=Chambrier+C[author]+AND+cancer+AND+catheter)

Description

List of publications in Pubmed

Access

Terms of data access (charter for data provision, format of data, availability delay)

Publications Totally implantable central venous access port infections in patients with digestive cancer: Incidence and risk factors. Touré A, Vanhems P, Lombard-Bohas C, Cassier P, Péré-Vergé D, Souquet JC, Ecochard R, Chambrier C. Am J Infect Control. 2012 Dec;40(10):935-9. doi: 10.1016/j.ajic.2012.01.024. Epub 2012 May 26. PMID:22633131 Is diabetes a risk factor for central venous access port-related bloodstream infection in oncological patients? Touré A, Vanhems P, Lombard-Bohas C, Souquet JC, Lauerjat M, Chambrier C. Eur J Clin Microbiol Infect Dis. 2012 Aug 22. PMID:22930406

Access to aggregated data

Access on specific project only

Access to individual data

Access on specific project only