Abstract
The authors report their experience with the PleurX tunneled catheter in patients with end-stage abdominal carcinomatosis and intractable ascites. Ten patients with intractable ascites and abdominal carcinomatosis underwent placement of tunneled PleurX catheters. The catheters were placed with combined US and fluoroscopic guidance. Patients' charts were reviewed for procedural complications, serum albumin levels, infection, efficacy of catheters in providing effective drainage of ascites, and duration of catheter patency. There were no procedural complications. The serum albumin level decreased from 2.7 g/L to 2.3 at 3 weeks and 2.4 g/L at 6 weeks. There were no catheter infections. Some patients required continuous drainage, whereas others were successfully treated by drainage once per week. Mean catheter survival was 70 days. In patients with end-stage abdominal carcinomatosis complicated by malignant ascites, the PleurX tunneled catheter can provide effective palliation and alleviated the need for repeated percutaneous paracentesis.

PMID: 11287517
[PubMed - indexed for MEDLINE]