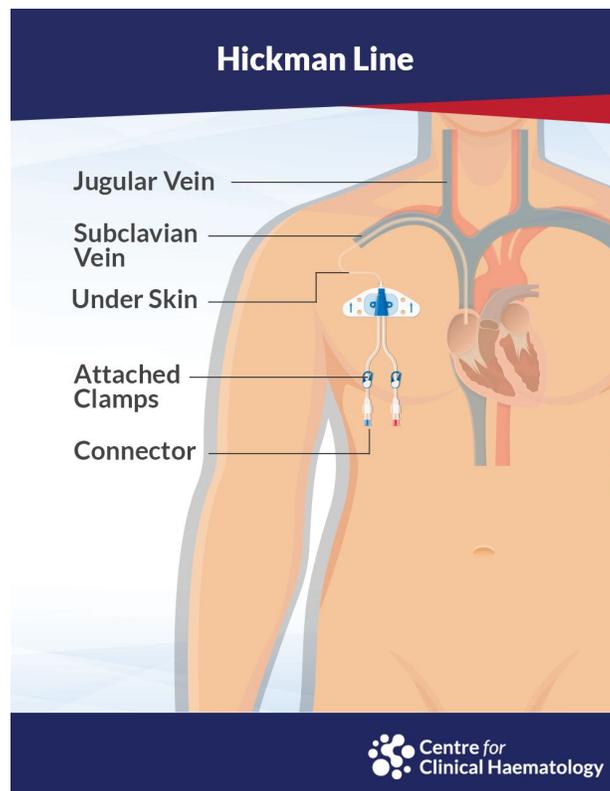


## What is a Hickman line?

A Hickman line is a thin, long silicone catheter that is inserted through one side of the chest area and threaded via a large vein to a place near your heart.

The line has 2 or 3 openings called lumens that allow the simultaneous administration of different medications. Each lumen is sealed off with a needle-free connector at the end and has a clamp along the line to control the flow of medication or to close the line when not in use.

The insertion is performed under local anaesthetic. After the procedure, you will be able to go home with the Hickman line on the same day, and the line can be left in place for weeks or months until you complete your treatment.



## What are the benefits of having a Hickman line?

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It is recommended for long-term treatments that require:

- Frequent administration of intravenous (IV) therapies such as chemotherapy.
- Frequent taking of blood samples.
- Direct administration of medicines into the central vein.

The benefits of having a Hickman line in place include:

- Reducing the discomfort, pain and damage to the veins caused by these long-term treatments.
- You will not need to be injected by needles every time you have treatment or when blood samples are required.

## What are the risks and complications of having a Hickman line?

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While a Hickman line is generally very safe, there are still potential risks and complications.

Risks during insertion:

- Discomfort or pain caused by the local anaesthetic.
- Blood infection.
- Bleeding due to accidental puncturing of an artery.
- Pain caused by accidental touching of a nerve by the needle.
- Very rarely, the lung may be punctured during the procedure.

Complications after insertion:

- Infection: Some patients may develop an infection which can be treated with antibiotics. In severe cases, the Hickman line will have to be removed.
- Blood clot (thrombosis): In rare cases, a patient can develop thrombosis. This can be treated with medication to clear the clot.
- Blockage (occlusion): This is usually caused by blood in the tube when the tube is not adequately flushed through after use.

## Are there any alternatives to a Hickman line?

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The doctor will determine whether a Hickman line is the recommended device for you based on your treatment, medical condition and history. A **Port-a-cath** and **Peripherally Inserted Central Catheter (PICC)** are alternatives.

## How is a Hickman line inserted?

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You will be asked to lie down on your back, and the intended insertion sites will be cleaned thoroughly with antiseptic fluid to sterilise the area.

Next, a local anaesthetic is injected into the skin of the chest and collarbone area to numb the area. After that, you should only feel slight pressure, not pain during the procedure.

Once the local anaesthetic has taken effect, two incisions will be made on the skin at your collarbone area and chest area. The catheter will be inserted via the collarbone incision and threaded along a large vein to a place near your heart. This will be guided by ultrasound. The other end of the catheter will be tunnelled under the skin towards and out the second chest incision. The incisions are closed with stitches.

A chest X-ray is used to check the position of the Hickman line.

## How do I care for my Hickman line?

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- Avoid vigorous exercises that may cause the line to fall out or soil the dressing.
- Keep the dressing clean and dry to prevent infections. While the dressings are splash-proof, care must be taken not to get them wet.
- Change the dressing and lumen caps regularly.
- Flush the Hickman line regularly. The line should be flushed frequently to prevent a blockage.

Our dedicated team of doctors and nurses will give you detailed instructions and provide you with any assistance to help you care for your Hickman line. You can also contact the clinic anytime if you have any queries.

## How is the Hickman line removed?

Once you have completed your treatment and no longer need the line, the Hickman line will be removed. The entry and exit sites are stitched to close the incisions.

*Disclaimer:*

*The information on the Centre For Clinical Haematology website is intended for educational use. It should not be considered or used as a substitute for medical advice, diagnosis or treatment from a qualified health professional.*