

RIFAMPICIN MICONAZOLE CVC

MICONAZOLE

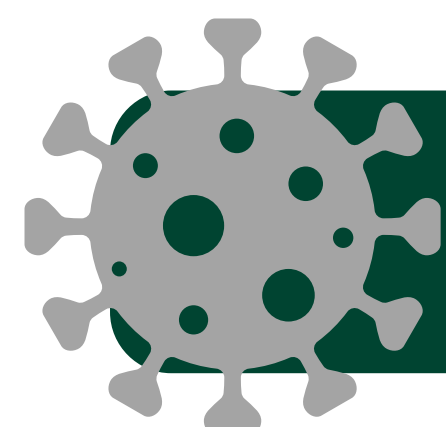
Synthetic antifungal with broad spectrum antimicrobial activity and low toxicity.

Mechanical action: inhibition of peroxidases, preventing peroxide accumulation inside the cell, which would result in cell death.

RIFAMPICIN

Highly effective bactericidal **antibiotic** against fast growing and resting bacteria in the biofilm such as Gram + and - microorganisms.

Mechanical action: inhibits RNA synthesis.



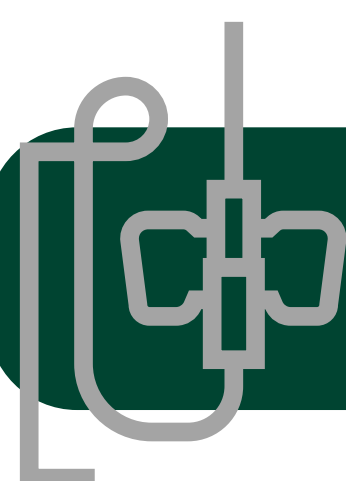
REDUCTION CATHETER-ASSOCIATED COLONISATION, LOCAL INFECTION AND BLOODSTREAM INFECTION

The combination of both substances leads to protection against microorganisms of a broad spectrum, such as Staphylococcus, Enterbacterial and Candida.



COST REDUCTION

The increase in costs is due to the need for antimicrobial treatment, complementary tests for diagnosis and prolonged hospital stay when complications such as Bacteraemia occur.



FEMORAL AND JUGULAR ACCESS

When selecting central venous access, consideration should be given to:

- Possible **complications**, both **infectious** and **mechanical**.
- Abuse of the subclavian vein and disuse of the femoral vein could lead to a **decrease in the incidence of bacteraemia**, but an **increase in the rate of mechanical complications** such as pneumothorax or haemothorax.

It is recommended, **whenever possible, to opt for subclavian access**, rather than femoral or jugular vein, in order to minimise the risk of infection, but this may not always be possible.

Some studies conclude that the use of **catheters impregnated with rifampicin and miconazole** placed in the femoral and jugular access reduce the risk of infection:

- **Bacteraemia.**
- Incidence of catheter-related **sepsis**.

SOURCE:

1. Lorente, L., Lecuona, M., Ramos, M., Jiménez, A., Mora, M., & Sierra, A. (2008). The Use of Rifampicin-Miconazole-Impregnated Catheters Reduces the Incidence of Femoral and Jugular Catheter-Related Bacteremia. Clinical Infectious Diseases, 47(9). <https://doi.org/10.1086/592253>
2. Lorente, L., & León, C. (2009). Cateterización venosa femoral: ¿realmente hay que evitarla? Medicina Intensiva, 33(9). <https://doi.org/10.1016/j.medin.2009.03.009>



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