Foreword

In December 2000 a Vascular Access Study Group was created from within the Italian Society of Nephrology. Since then the aims of the Group have been a) to obtain a better understanding of the problems concerning vascular access for hemodialysis in general, and b) to identify and teach the most useful methods for planning, constructing and maintenance. The question concerning teaching could be "What and how should we teach since there are presently no Italian guidelines concerning vascular accesses?" The role of the Vascular Access Study Group is not to prescribe guidelines directly, but to provide the Italian Society of Nephrology with helpful data to develop them. For this purpose it is important to meet all the Italian teams with experience in educational programs. With their help we can create a teaching model for other Italian centers that want to join this project.

Three years ago an educational program was set up by Dr. F. Cavatorta in Imperia within his unit, consisting in an annual course for nephrologists. His example was followed by Prof. L. Berardinelli, in Milan, who started a specialization course that attracted a large number of participants. Both courses deal with the entire spectrum of problems regarding vascular accesses, and lessons cover both theory and practice (live operations or video projection). The topics discussed are also the same, although probably there is a different slant as Cavatorta is a nephrologist and Berardinelli a vascular surgeon. Nevertheless, their courses share a common "philosophy" aimed at saving the vascular estate of patients undergoing hemodialysis by adopting a correct policy on planning and constructing vascular accesses.

These courses have provided the Vascular Access Study Group with an important point of reference for setting up a general educational program and, consequently, identifying a teaching model.

The experience gained by Dr. Cavatorta and his co-workers can also provide us with useful indications for guidelines on catheter implanting and management. The problem of side effects from the use of central venous catheters (CVC) has yet to be solved. With the exception of management complications that increase the morbidity of patients undergoing hemodialysis, the most important effect of catheter use is damage to the vein wall, at times serious and permanent. Hence it is very important to achieve safe CVC implantation and avoid every drawback due to incorrect puncture or catheter tip malpositioning. The following papers treat some interesting themes regarding the positioning and maintenance of central venous catheters. However, they represent only a small part of all the vascular accesses topics proposed by Dr. Cavatorta on his annual course.

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