**Patient Population**

**Inclusion:**
- incident or prevalent HD patients with tunnelled intravenous catheters
- able to give informed consent

**Exclusion:**
- intolerance to ethanol
- personal, cultural or other objection to the use of ethanol
- history of an exit site, tunnel, or bloodstream infection associated with the current catheter
- Pregnancy

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**Endpoints**

- **Primary Endpoint**
  - time to first episode of catheter-related bloodstream infection (CRBSI)

- **Secondary Endpoints** – whether intervention results in:
  - adverse reactions
  - incidence of CRB caused by different pathogens
  - time to infection-related catheter removal
  - time to exit site infection

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**Randomisation**

- **Stratification**
  - Incident catheters n=15
  - Prevalent catheters n=34

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**Assessed for eligibility**

- n=49

**Excluded**

- n=0

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**Ethanol lock**

- 3mL 70% lock weekly after HD
- Heparin lock twice weekly after other HD sessions

- n = 25
  - Prevalent n=19
  - Incident n=6

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**Heparin Lock**

- Thrice weekly after HD

- n = 24
  - Prevalent n=15
  - Incident n=9

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**Allocated to ethanol locks**

- n= 25
  - Received ethanol locks n= 25
  - Did not receive ethanol locks n= 0

**Lost to follow-up**

- n=0
  - Discontinued ethanol locks prior to catheter removal
  - n=9

**Analysed**

- n = 25
  - Excluded from analysis n=0

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**Allocated to heparin locks**

- n= 24
  - Received heparin locks n= 24
  - Did not receive heparin locks n=0

**Lost to follow-up**

- n=0
  - Discontinued heparin locks prior to catheter removal
  - n=0

**Analysed**

- n = 24
  - Excluded from analysis n=0

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[Removal from the trial did not result in heparin lock cessation if the catheter remained in situ as heparin locks are the standard of care for prevention of catheter thrombosis in this unit. Follow-up of outcomes still occurred.]