

Information on Placement of Peritoneal Dialysis Catheter

Introduction

Renal patients who are to receive peritoneal dialysis will have to undergo an operation for the insertion of a special catheter into the abdominal cavity. The catheter will be the access for infusion of peritoneal dialysis fluid.

The Procedure

- The physician will inject a local anaesthetic to the skin adjacent to the umbilicus and a 5cm long incision will be made until peritoneum comes into view. Then one end of the catheter will be inserted into the abdominal cavity while the other end will go transversely through the subcutaneous fat and out of the body, 5-6cm away from the incision.
- The surgery ends on completion of suturing. The whole procedure lasts for about 1 hour and the patient remains conscious throughout.
- Under certain circumstances (e.g. the patient is a child or a complicated surgery), the surgery will be done under general anaesthesia.

Risk and Complication

Complications

Occurrence Rate

1. Leakage of dialysate from exit site	12%
2. Infection	7%
3. Bleeding	5%
4. Intestinal perforation	0.5-3.5%

- Other possible complications: post-surgery incisional pain, perforation of other organs (e.g. bladder and blood vessels), peritonitis, internal bleeding, catheter migration or blockage and the development of incisional hernia etc.
- Should there be complications, the patient may have to undergo other investigations or surgery including catheter removal. When the patient's condition has stabilized, placement of catheter may be done again.

Before the Procedure

- Patient has to sign the Surgical Consent Form after the physician has explained to him/her about the reasons, procedures and possible complications of the surgery;
- Enema will be performed on the patient, if necessary to clear the large bowel;
- Foley catheter may be inserted, if necessary, to empty the urinary bladder
- Body cleaning before the procedure: day hospital patients can do the bathing at home;
- A 4-hour fasting period is required before surgery (if necessary).

- Diabetes patients will withhold the anti-diabetic medications upon fasting as prescribed;
- Medications for control of blood pressure should be taken as advised;
- Aspirin, anti-platelet agents and warfarin/anticoagulants may need to be withheld before the surgery according to doctor's recommendation.
- Empty the bladder before the procedure. If the bladder is not emptied effectively, bladder catheterization may be needed.

After the Procedure

- The incision will be covered with sterile gauze. The patient has to keep the wound clean and dry.
- Resume aspirin, anti-platelet agents and warfarin/anticoagulants as prescribed
- If patient feels unwell, he/she should inform the medical staff immediately.

Follow Up

- If the wound heals normally, sutures will be removed in 14 days.
- To avoid infection, keep the exit site and main wound dry and clean. Do not scratch on the exit site and surrounding skin. After 4-6 weeks when the wound heals completely, patients could take a shower at home after learning the techniques.
- 4-6 weeks after discharge, the patient will go back to the renal centre to learn how to perform peritoneal dialysis, care of catheter and the exit site. On learning the techniques, the patient will perform peritoneal dialysis at home.
- The patient may have to undergo peritoneal dialysis or hemodialysis treatment to clear the body of metabolic wastes while waiting for his/her turn to learn how to perform peritoneal dialysis.
- Patient should take good care of catheter and the exit site.

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor or the respective renal centre.