

Surgical insertion of a Peritoneal Dialysis (PD) catheter

Introduction

You have been given this leaflet because your kidneys are no longer functioning efficiently. Excess water and waste need to be removed from your body in another way, through dialysis.

The method of dialysis you have chosen is peritoneal dialysis. To enable you to have this type of dialysis, you will need a Peritoneal Dialysis (PD) catheter.

What is a Peritoneal Dialysis (PD) catheter?

The PD catheter is a soft silicone tube placed inside the abdomen. This allows dialysis fluid to enter the abdominal cavity and then drain back out again.

What are the benefits of having the PD catheter inserted?

The PD catheter will be inserted while you are under a general anaesthetic (asleep).

If you have had previous operations on your tummy, it may be too uncomfortable to have the procedure without a general anaesthetic.

A general anaesthetic is also preferred if you are having another procedure done at the same time (for example a hernia repair).

Pre-Assessment Clinic

Reference No.

GHPI1345_04_24

Department

Renal Services

Review due

April 2027

You will need to visit the Pre-Assessment Clinic and be examined by the surgeon or a member of the surgical team before a date for the procedure can be arranged. The surgeon will discuss the procedure with you and answer any questions you may have.

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BEST CARE FOR EVERYONE



Before hospital admission, and to reduce the risk of infection, you will be screened for Methicillin-Resistant Staphylococcus Aureus (MRSA). You will be given an antiseptic skin wash. This is to be used for the 5 days before your operation to reduce any bacteria on your skin.

Where will the PD catheter insertion be carried out?

The procedure will be carried out in an operating theatre either at Gloucestershire Royal Hospital or Cheltenham General Hospital.

How long will the procedure take?

The procedure will take about 45 minutes, but you also need to add the time it takes to be anaesthetised and recover.

Do I need to prepare for the procedure?

You will be asked to shower or bath at home, using the antiseptic wash for 5 days, before the day of the procedure.

You will also need to take a strong laxative as advised before the procedure. This is to make the bowels loose.

You must not eat for 6 to 8 hours before having a general anaesthetic. You may sip water from a 170ml cup (standard hospital cup) or the equivalent amount in your own bottle. The cup or your bottle can be refilled to 170ml every hour until you go to theatre. If you are already on a fluid restriction, please keep within your daily allowance.

Do not suck sweets or chew gum during this period.

Full instructions will be given in the letter you will receive confirming your operation date and time.

Valuables

Please do not bring valuables, jewellery or large sums of money into the hospital. If this is unavoidable, please ask a relative or a friend to take them home for you. The hospital cannot accept responsibility for the loss of items.



What happens after the procedure?

You may need to stay overnight if the procedure is not carried out until the afternoon. You will then be discharged the following morning.

If you have the operation in the morning, you may be able to go home early evening if there are no complications.

Do not travel home by public transport after you have had your PD catheter inserted. You should ask a relative or friend to drive you home by car.

You should not drive yourself for at least for 2 weeks.

If you cannot arrange your own transport, please let us know before the day of your appointment, so that we can book transport for you.

Will I have any stitches?

Surgical glue or stitches will be used to close your wound. We will advise you of the type of wound closure used. If you have had stiches then we will arrange for them to be removed when needed.

Possible risks

There are very few risks associated with having a PD catheter inserted but you should be aware of the possible complications.

When the PD catheter is being inserted, it may accidentally puncture the wall of the bowel or bladder. If this happens, the catheter will be removed immediately but you might need to have an additional operation to repair your bowel. This is a very rare complication.

After it has been inserted, your PD catheter may move into a poor drainage position, especially if your bowels are not loose (remember to take your laxative as directed). Your tube may need to be repositioned. This complication happens in 10 to 25 of every 100 cases.

The fluid we use to flush the catheter after it has been inserted may appear blood stained. This usually stops without further treatment.



You may develop an infection. We will tell you how to recognise the signs of an infection before you are discharged.

If you do develop an infection, you will need to take antibiotics. Rarely, you may need to have your catheter taken out and another one inserted a few weeks later.

There is always a small risk of a serious reaction or complication if you have a general anaesthetic.

What should I do if I cannot attend my appointment or I am not feeling well?

Please let us know as soon as you can if you are unable to attend your appointment due to experiencing diarrhoea/ vomiting or if you have a high temperature. We will offer you advice and arrange another appointment.

Contact information

If you have any questions or queries, please contact:

PD Specialist Nurses

Tel: 0300 422 6761 Monday to Friday, 8:00am to 4:00pm

Ward 7b, Renal Unit

Gloucestershire Royal Hospital Tel: 0300 422 6768 Available 24 hours a day

PD Coordinator

Tel: 0300 422 6890 Monday to Friday, 7:30am to 4:30pm

Mr Cooper's secretary

Tel: 0300 422 3345 Monday to Friday, 8:00am to 4:00pm

Mr Kulkarni's secretary

Tel: 0300 422 3355 Monday to Friday, 8:00am to 4:00pm



Mr Wilson's secretary

Tel: 0300 422 3343

Monday to Friday, 8:00am to 4:00pm

Further information

Kidney Patient Guide

Website: www.kidneypatientguide.org.uk

Kidney Care UK

Website: www.kidneycareuk.org/about-kidney-

health/treatments/

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

- 1. What are my options?
- 2. What are the pros and cons of each option for me?
- 3. How do I get support to help me make a decision that is right for me?

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information and Counselling, 2011;84: 378.85.







AQUA https://aqua.nhs.uk/resources/shared-decision-making-case-studies/