

PERITONEAL DIALYSIS CATHETER

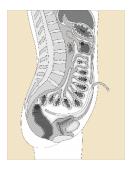
Peritoneal dialysis access

In peritoneal dialysis (PD), the peritoneal space inside your abdomen is bathed with a special fluid that removes toxins, excess water and salts from your body. Since this treatment happens every day, you need safe, consistent and easy access to your abdominal cavity. This access is created using a permanent tube called a peritoneal dialysis catheter.

The PD catheter

The PD catheter is a flexible plastic tube that is placed in the peritoneal cavity, usually just below and to one side of your navel. It will stay there as long as you are using this form of dialysis. Approximately 10-15 cm of tubing remains outside of the skin. This tubing can be taped or tucked into a special belt under your clothing.

Once your PD catheter is in place and the catheter exit site has healed, it shouldn't cause discomfort or irritation.



Surgery to place the catheter

A surgical procedure is needed to place a PD catheter. This can be done either by a surgeon or a nephrologist. Your nephrology team will discuss which placement approach is best for you.

If a surgeon places your PD catheter, the procedure will be done in an operating room, usually under general anesthetic while you're asleep. A nephrologist generally places the tube at your bedside under local anesthetic, or freezing, while you're awake. Not all centres have nephrologists that put in PD catheters, so this is something you'll need to discuss with your nephrology team.

Once the catheter is in place, it takes time for the exit site to heal before the catheter can be used for peritoneal dialysis. It will normally be at least two weeks before your catheter is ready, however in some circumstances the catheter is used right away. The catheter may also be left under the skin, ready to start dialysis when needed that might be in many months later.

Care of your PD catheter

Following the placement of your PD catheter:

Your surgeon and/or nephrology team will give you instructions about the care of your dressing. They'll let you know when the dressing can be removed, and they'll also tell you when to come in and have your catheter flushed, if needed.

Check the incision and exit site (unless you have a catheter that is buried under the skin for later use), where the tube comes out of the skin, for any discharge, bleeding, swelling or pain. Notify your surgeon and/or your nephrology team if you experience any of these things.

Care of your catheter:

Follow any directions your nephrology team gives you. They will go over bathing and catheter care with you. This may involve catheter dressings, antibiotic ointments, or other care designed for your specific needs.

Once you're home and performing peritoneal dialysis:

Follow any advice given to you by your nephrology team.

Check your exit site regularly for changes, including pain, swelling, redness, bleeding, or discharge. If any of these changes occur, contact your nephrology team to discuss what should be done next.

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