

Patient Information

Peritoneal Dialysis Catheter Insertion Under Local Anaesthetic

Renal Department



Introduction

You have decided from the information you have received from the doctors and nurses in the renal department that peritoneal dialysis (PD) is the best form of dialysis for you. This booklet is intended to provide you with information regarding the insertion of your PD catheter.

Peritoneal Dialysis

The abdomen (tummy) has a lining called the peritoneal membrane which can be used as a filter to remove excess waste and water. As you've opted for peritoneal dialysis, a tube (catheter) will be inserted into your abdomen during an operation (see figure 1). This will allow you to drain dialysis fluid in and out of your tummy yourself.



Figure 1

How do I have the tube put in my abdomen?

To receive PD you will need to have a small operation in the minor operation room on the renal ward. During the operation, which is performed under a local anaesthetic and normally takes an hour, a plastic tube will be permanently inserted into your abdomen. This tube is called a PD catheter. It is about 30 centimeters (12 inches) long and as wide as a pencil. The PD catheter will be placed through your lower abdominal wall, into the peritoneal cavity. Half of the catheter lies inside your abdomen, and half lies outside. It will come out on the right or the left, under your navel (tummy button) (see figure 2).

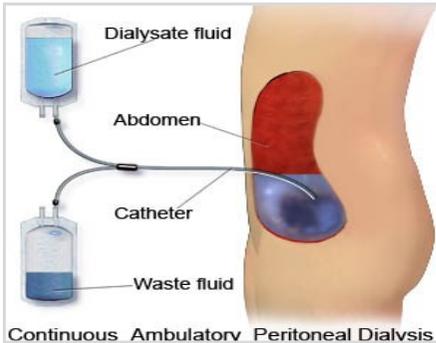


Figure 2

The PD catheter acts as a permanent pathway into your peritoneal cavity. Without it you would not be able to perform PD, so it is important to look after it.

The Local Anaesthetic

Your renal doctor has decided that you are suitable to have this operation under a local anesthetic. Local anesthetic causes a complete loss of feeling to a specific area of your body without making you lose consciousness. It works by blocking the nerves from the affected part of your body so that pain signals cannot reach your brain. Therefore, you will not be able to feel any pain during the procedure. You will also be given some intravenous sedation. This technique involves a sedative drug being given directly into a vein in your arm or hand. You will be able to talk, but the sedation is quite deep and you may not remember much about the treatment. Your breathing, pulse and blood pressure are measured during treatment and you will need someone to take you home and stay with you for the rest of the day.

How will I be prepared for the operation?

The doctor will examine your abdomen and talk to you about your operation in more detail. The doctor will ask you to sign a consent form. You will be prescribed a body wash to wash in prior to your operation and nasal ointment to help prevent nasal bacteria transferring onto your skin. Medicine to help you empty your bowels more regularly will also be prescribed so that it is easier for the doctor to position the PD catheter during your operation.

The nurse will also give you information and instructions for the day of your operation.

What do I need to bring with me on the day of the operation?

You will need to bring into hospital your usual medication and some comfortable clothes or nightwear to change into. You can bring in something to read if you wish and you are advised to bring in toiletries in case of an overnight stay. You are advised not to wear jewellery, make-up or nail varnish.

Fasting Instructions

The day before your operation you should eat normally and drink plenty to prevent dehydration until midnight. After midnight do **not** have any more solid food, soup or any drinks made from milk. You may drink clear fluids on the morning of your operation up to 7am unless otherwise advised.

If you are a diabetic you must inform the nurse at your pre-operative appointment. Diabetic patients will be given specific instructions according to individual need regarding fasting and medication for the day of surgery.

What happens on the day of the PD catheter insertion?

You will be asked to attend the Renal Intervention Unit at a designated time in the morning. The catheter insertion is usually carried out in the morning in the minor procedures room on Ward 6B.

On attending the Renal Intervention Unit you will be asked to ensure you have emptied your bladder and bowels. You will have your blood pressure, pulse, oxygen saturation and temperature checked. You will be asked to change into a hospital gown and lie on your bed prior to your operation.

A peripheral venous cannula will be inserted so that an antibiotic can be given to you prior to your operation, this will help prevent infection. The cannula will also be used to give your sedation during the operation. You will then be wheeled on your bed to the minor procedures room and will stay on your bed throughout the operation.

Once in the minor procedures room you will be connected to a cardiac monitor and blood pressure machine so that you can be monitored continuously throughout the PD catheter insertion. A doctor will then give you the sedation through your cannula. Once the sedation has started to work the doctor will begin the procedure of inserting the PD catheter. During this time you will feel sleepy but will be aware of people working around you.

Your tummy will be cleaned with a cleaning solution. The doctor will then insert some local anaesthetic into the skin below your tummy button. The doctor will then make a small cut into the catheter insertion site in your tummy.

Insertion of the PD catheter should not be painful, although you may feel some pushing and other peculiar sensations in your tummy while the catheter is being introduced. This is perfectly normal and does not usually cause significant discomfort to patients. When the operation is finished the small incision will be stitched up and you will see the tube in your tummy. The insertion site will be covered with a dressing and the catheter will be secured to your tummy with another dressing.

What complications might occur?

There are four main complications of the procedure:

- **Technical failure** - Occasionally insertion of the catheter under local anesthetic fails for technical reasons. If this happens then the procedure is discontinued and you will be advised of the alternative way in which the catheter can be put in.
- **Bleeding** - Bleeding at the insertion site (or exit site) can occasionally occur. Any bleeding that does occur usually stops spontaneously on its own, but occasionally requires further treatment.
- **Infection** - You will be given antibiotics before your PD catheter insertion to prevent infection. Despite this, some patients can develop an exit site infection or abdominal infection and this requires treatment and a further dose of antibiotics. In the worst case the PD catheter may need to be removed.
- **Bowel perforation** - Very occasionally during the procedure the bowel is perforated. This complication is very rare. However, when it does occur it is a serious complication and may require you to have a surgical operation to repair the perforation.

What happens after the procedure?

Following the procedure you will be monitored by the nursing staff. You will be given something to eat and drink. There may be some discomfort in your tummy once the local anaesthetic has worn off so you will be offered painkilling medication.

Prior to going home you will normally be given the following:

- Laxative tablets as there is a tendency to become constipated;
- An imminent outpatients appointment with the Home Therapies team.

Going Home

You are strongly advised not to drive for two weeks following your PD catheter insertion, so you will need someone to collect you.

You are advised to take at least seven days off work. If you have a more physical job you are likely to need more time off.

You are advised not to have a bath or shower for 10-14 days following surgery.

Before you leave hospital you will be given an appointment with the Home Therapies team and they will discuss with you when they plan to start your PD training. This is likely to be in two weeks' time. They will also show you how to care for your catheter, check that your wound is healing and give further advice as appropriate.

You should **not** remove your dressing before this appointment.

What things do I need to look out for once I am home and what do I do if I think there is a problem?

If you develop tummy pain, a temperature, flu like symptoms or diarrhoea, you must contact us **immediately** as this is a sign that you may have an infection.

- Monday to Friday, 8am to 4pm contact the Home Therapies team.
- Out of hours, weekends and Bank Holidays contact Ward 6B.

Contact telephone numbers are on the back cover of this booklet.

What if I have any further questions

If you have any further questions about the procedure, please speak to one of the Home Therapies sisters or a renal doctor.

Contact details

Ward 6B, Nephrology (Renal) Ward, Lister Hospital	01438 285063 / 284068
Renal Liaison Department	01438 285643
Home Therapies	01438 284100
Renal Access Nurse	01438 284624

Further Information

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www.renal.org.uk
www.kidney.org.uk

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