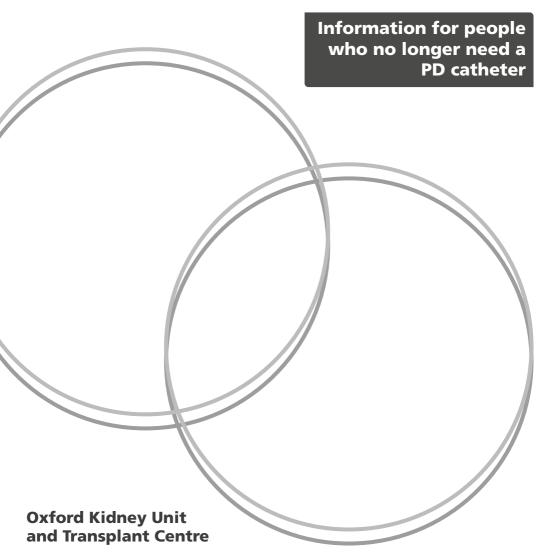


Removal of Your Peritoneal Dialysis (PD) Catheter



This leaflet will provide you with information about your peritoneal dialysis (PD) catheter removal. If you require further information, please contact your renal or transplant team.

Your PD catheter can be removed in one of two ways. Your kidney doctor, transplant doctor, or PD nurse will discuss with you which method would be suitable for you.

What is the difference between the 2 types of PD catheter removal?

The two methods are:

- PD catheter pull.
- Surgical operation.

The differences in the procedures are shown below:

Type of anaesthesia needed

PD catheter pull

No anaesthesia required.

Surgical operation

You need to be fit for a general anaesthetic (where you are made unconscious).

How long will it take to remove the PD catheter?

PD catheter pull

A few minutes.

Surgical operation

The operation takes 20 minutes, but you will be in hospital for about 4 hours.

Will I need to take time off work?

PD catheter pull

No interruption to work schedule. You can resume normal activities (but keep the site dry for 2 to 4 days) straight away.

Surgical operation

No work for 1 or 2 weeks so your wounds can heal. This will depend on the type of work you do. If your job is manual we may suggest taking more time off or light duties only. You shouldn't do any heavy lifting (more than 5kg) for 3 weeks.

What happens to the cuffs?

PD catheter pull

The 2 cuffs are usually left inside you. They can become infected months or years after the PD catheter pull (rare). You may need a procedure to remove them and a course of antibiotics.

Surgical operation

The 2 cuffs are removed during the operation. Sometimes people may only have 1 cuff to remove. A surgeon or PD nurse will let you know about this.

Will I have any wounds?

PD catheter pull

You will need a dressing over the PD exit site. This will heal in 2 to 4 days. You will be left with a small dent where the tube was.

Surgical operation

You will have a wound about 4cm long, just below your belly button. Dissolvable stitches are inside the wound then a glue seals the wound.

Where is the procedure carried out?

PD catheter pull

This can be done in a clinic room, PD unit or a procedure room.

Surgical operation

This operation is carried out in an operating theatre. You would be admitted to a Day Surgery Unit.

Will there be any bleeding?

PD catheter pull

No, a few millimetres of fluid may come out of the tunnel during the procedure.

Surgical operation

Although rare there is a risk of bleeding through the wound or through the PD exit.

Will I have any pain?

PD catheter pull

There may be a few seconds of discomfort during the procedure.

Surgical operation

You may experience some discomfort whilst the wound and PD exit site heal.

- Recent infection such as PD peritonitis or exit site infection (usually within 3 months or a specific type of bacteria infection).
- Surgery on your abdomen after the PD catheter was inserted, such as a hernia repair.
- The superficial cuff is near the exit where the catheter comes out of your body.
- Your local PD unit prefers surgical removal of PD catheters.
- Your PD catheter was not inserted in the Oxford Kidney Unit.

If you are taking medication that thins your blood, such as warfarin, clopidogrel or apixiban, please call the PD Unit on **01865 225 792** for advice at least a week before your catheter removal. It is best to avoid these medications for a week before your catheter is removed, if it is safe for you to do so.

PD pull – how is this carried out?

A PD catheter pull is a quick procedure and only takes a few minutes. After a nurse or doctor has explained the procedure to you, they will ask you to sign a consent form. We will then ask you to lie on a couch or bed. Your dressing will be removed and your exit site inspected. If there is any sign of infection you will be referred to a surgeon for surgical removal, as pulling the tube and leaving the cuffs inside your abdomen may lead to a further infection.

If the superficial cuff is near to where your tube comes out of your abdomen, we will give you a local anaesthetic to make the area numb, so that we can remove the superficial cuff. We will then continue with the PD pull.

Page 7

With one hand we will apply firm pressure to your abdomen around the PD catheter site. We will then pull steadily and firmly on the catheter with the other hand. You may feel a pop as the superficial cuff comes away from the PD catheter. As we continue to pull you may hear another pop and the PD catheter will then slide out of your abdomen. Some people have explained this as feeling butterflies. Sometimes a few millimetres of fluid leaks from the abdomen. The usually resolves within seconds. A dressing will then be applied over the exit site.

It is unusual to experience any pain, but some people may feel some discomfort as the catheter comes out.

Surgical operation – how is this carried out?

Before the operation you will need to have a pre-operative assessment. During this we will let you know what to expect at the operation and make sure you are fit for surgery.

A small cut (4 to 5cm) will be made just below your belly button. The surgeon will remove the catheter and cuffs from your abdominal cavity. During the operation both of the cuffs are removed with the PD catheter. This is this carried out under a general anaesthesia. The cut will be closed using dissolvable stitches and waterproof glue applied to the wound. This should be kept dry for 24 hours to allow the glue to cure.

You may have a dressing over the exit site (where the catheter used to come out of your abdomen).

Returning home after a PD catheter pull

Will I have any pain after a PD catheter pull?

Once the procedure is completed you shouldn't have any pain.

Can I drive after the procedure?

Yes.

Can I bathe after the procedure?

Avoid getting the site wet for 2 to 4 days.

What should I do about the dressing?

Remove the dressing after 2 days, if it still looks a little red apply another dressing for 2 more days. After 4 days it should be healed and you can start showering and bathing.

What should I do about work?

You shouldn't need anytime away from work following the procedure.

Returning home after a surgical PD catheter removal

Will I have any pain after a surgery PD catheter removal?

You may experience some discomfort whilst the wound and PD exit site heal. You should take paracetamol as instructed on the packet. (500mg to 1g every 4 to 6 hours, no more than 8 (4g) tablets in 24 hours).

Can I drive after the procedure?

You shouldn't drive for a week after the operation. You must be able to safely perform an emergency stop once you start to drive again.

What should I do if I am bleeding?

Wash your hands, apply a dressing to the affected site. Use a small dry cloth and press firming onto the affected site for a minimum of 15 minutes. Do this twice. If the bleeding seek emergency help (999 or 111).

What should I do about any dressings?

You may have a dressing over the old PD exit site. This usually needs to stay in place for about 5 days. Keep it dry during this time. After 5 days it should have healed and you can resume bathing and showering. The wound is closed with glue, this needs to cure for 24 hours so do not apply water to it during this time. The glue will gradually fall off once you start showering. Avoid picking the glue off as this increases the risk of developing an infection. If you are unsure about what to do please contact a PD nurse.

What should I do about work?

You will probably need up to a week away from week. If your job is physically demanding we may suggest you stay away from work for about 2 weeks.

When should I get help?

Monday to Friday contact a PD nurse or renal ward immediately. At the weekend contact 111.

If you experience severe abdominal pain bleeding that won't stop any wounds or the PD exit site become red, inflamed, or have a discharge.

If you experience severe abdominal pain, or your wound or exit site becomes red, inflamed or painful, contact your PD Unit or the Renal ward immediately.

Contacts

Oxford Peritoneal Dialysis (PD) Unit

Telephone: **01865 225 792** (8am to 6pm, Monday to Friday) Email: **pd.team@ouh.nhs.uk** (between 8.30am and 4.30pm)

Wycombe PD Unit Telephone: 01494 426 349 (8am to 6pm, Monday to Thursday) Email: RenalHomeTherapiesWycombe@ouh.nhs.uk

Swindon PD Unit

Telephone: **01793 605 288** Email: **<u>RenalPDSwindon@oxnet.nhs.uk</u>** (8am to 6pm, Monday to Friday)

Milton Keynes PD Unit

Telephone: **01908 996 465** (8am to 4pm, Monday to Friday) Email: **<u>RenalPDMiltonKeynes@oxnet.nhs.uk</u>**

The PD nurses may be visiting people at home, so all units have an answerphone telling you who to contact if no one is available

Renal Ward Churchill Hospital

Telephone: **01865 225 780** (24 hours, including weekends and bank holidays)

Useful websites

Oxford Kidney Unit

Lots of information about the Oxford Kidney Unit for patients and carers.

Website: www.ouh.nhs.uk/oku

Kidney Patient Guide

Information for patients with kidney failure and those who care for them.

Website: www.kidneypatientguide.org.uk

Kidney Care UK

A charity which has lots of practical support and information for people with kidney disease.

Website: www.kidneycareuk.org

Six Counties Kidney Patients Association

The SCKPA is run for patients by patients or family members.

They offer support to people suffering from kidney disease or who are on dialysis. They work closely with the Oxford Kidney Unit and have branches in Oxfordshire, Northamptonshire, Buckinghamshire, and Milton Keynes, and parts of Wiltshire, Gloucestershire and Berkshire.

Website: www.sixcountieskpa.org.uk

National Kidney Federation

A charity which has lots of practical support and information for people with kidney disease.

Website: www.kidney.org.uk

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Authors: Jayne Woodhouse, Advanced Nurse Practitioner, Peritoneal Dialysis and Mr Simon Knight, Transplant Consultant

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