

ST GEORGE HOSPITAL

PERITONEAL DIALYSIS (PD) UNIT

- Business Hours: Monday to Friday 07.30am – 04.00pm
(Closed Weekends & Public Holidays)
- Contact Number: **(02) 9113 – 3770**
- Located: “The St George Renal Care and Research Unit”, 9 South Street Kogarah NSW 2217
- For after business hours care – please attend St George Hospital’s Emergency Department.
- For after business hours PD advice – please contact 4 South Renal Ward on **(02) 9113 – 3448** or **9113 – 3458** or **9113-2253**. Please request for the in-charge or a senior registered nurse to assist you.

PERITONEAL DIALYSIS QUICK PROBLEM SOLVING GUIDE AT HOME

PERITONITIS

- Peritonitis is an infection in the peritoneum. It will make you very unwell if left untreated.
- Signs & Symptoms:
 - Cloudy Bag**
 - Abdominal Pain**
 - Fever**
 - Nausea &/or Vomiting &/or diarrhoea**
- If you have a cloudy bag, seek medical attention **urgently** by:
 - **Contacting the PD unit/nurses immediately during business hours.**
or
 - **After business hours: Present yourself and your patient card to a hospital's Emergency Department**
 - Ensure the hospital has Peritoneal Dialysis services.
 - Inform emergency department nurses/doctors you are a peritoneal dialysis patient and you have a cloudy bag.

PERITONITIS (continued)

- Peritonitis will be treated with antibiotics for 3 weeks.
- Antibiotics will be added into the dialysis bags which will be given to you through the manual (CAPD) exchange.
- You may need to stay in the hospital for the entire antibiotic treatment.
- Cloudy bags should start to clear within 72 hours after commencing antibiotic therapy. If your bags are still cloudy after this time, you will need a re-assessment and the PD fluid will be re-tested.
- One week after you complete the course of antibiotics, you will be booked to return to the PD unit for a repeat PD fluid test. This is to ensure the infection has cleared.

EXIT SITE CARE

Attend to exit site care and dressing change everyday:

- Shower daily as normal (PD nurse will advise when you can shower after a new PD catheter). **Do not soak in the bath.**
- Secure the catheter tip with micropore tape before removing your exit site dressing. **Do not let your catheter fall or pull as this will irritate the exit site.**
- Always shower with the dressing on. Gently wash your exit site with antibacterial soap and water after shower.
- **Pat dry your exit site with white gauze squares only.** Ensure your exit site is completely dry.
- Clean your exit site with betadine or chlorhexidine swab (whichever is suitable). Once dry, apply antibacterial (bactroban) ointment gently.
- Cover exit site and titanium connector with new cutiplast, mepore or tegaderm (whichever is suitable).
- Always secure the end of your catheter with a tape to prevent from dangling.

EXIT SITE CARE (continued)

- Exit site infections must be treated as soon as the signs of infection are present.
- An exit site infection left untreated can lead to peritonitis.
- Signs & Symptoms of Exit Site Infection
 - Redness around the exit site**
 - Swelling around exit site**
 - Soreness when you touch the area**
 - Pus around the exit site.**
- If you notice any of the above signs and symptoms, contact the PD unit immediately to book a same day assessment.
- You will have to come in, we will review and swab the exit site. Antibiotic treatment will be started if needed.
- If you notice signs of infection outside of PD unit's business hours, attend the hospital Emergency Department immediately.
- An infection will be treated with oral and topical (ointment or drops to the exit site) antibiotics for 3 weeks.

EXTENSION SET CONTAMINATION

CAUSES & TREATMENT

Causes of Extension Set Contamination include:

- Accidental touching or dropping of the catheter extension set tip
- Disconnection from metal (titanium) connector
- Split, hole or accidental cutting of extension set or catheter
- Broken or damaged catheter extension set valve

What to do if any of the above happens:

- **DO NOT CONTINUE WITH DIALYSIS IF EXTENSION SET or CATHETER IS CONTAMINATED OR DAMAGED IN ANY WAY.**
- Place a new minicap on the catheter extension set tip and place a blue clamp on the catheter above the damaged area.
- Contact the PD Unit to book a same day assessment during business hours or attend the Emergency Department after hours:
 - Your extension set will be changed.
 - Your PD fluid will be tested.
 - You will be given antibiotic treatment.
 - If peritonitis is present, you may stay in the hospital for up to 3 weeks for treatment.

Taking antibiotics

- Taking antibiotics to treat infections can make you more prone to developing fungal infections because it kills both the good and bad bacteria.
- **Taking oral nystatin during your antibiotic treatment may prevent a PD-related fungal infection.**
- Remind the doctor prescribing your antibiotic treatment to add **oral nystatin** to your prescription. Recommended oral nystatin (Nilstat) dose is 500 000 units, 4 times a day.
- Contact the PD nurses or nephrologist for advice.

Medical or surgical procedures

- Invasive medical or surgical procedure puts you at risk of infection.
- Invasive medical or surgical procedures can affect your peritoneal dialysis.
- Invasive medical or surgical procedures can put you at risk of developing PD-related infection.
 - I.e. Colonoscopy, Endometrial biopsy, ERCP, Gastroscopy, Barium enema, Hysteroscopy, Liver biopsy, Cholecystectomy, Proctoscopy , Dental work, Hernia repair, PDC manipulation or repositioning, Kidney transplantation and Transoesophageal echocardiogram
- If you are scheduled for any invasive medical or surgical procedures, contact the PD nurses and nephrologist for advice on preparation and preventative antibiotic treatment.

FLUID OVERLOAD

SIGNS, SYMPTOMS & TREATMENT

Signs & Symptoms

- A sudden increase in weight
- Swollen ankles
- Puffiness around eyes
- Breathlessness &/or a persistent cough
- Elevated blood pressure

Treatment

- Decrease oral fluid intake
- Increase the strength of the dialysis fluid
- Contact the PD Unit if unable to reduce weight or relieve symptoms.

DEHYDRATION

SIGNS, SYMPTOMS & TREATMENT

Signs & Symptoms

- A sudden decrease in weight
- Feeling Dizzy
- Feeling weak & lethargic
- Decrease in blood pressure

Treatment

- Increase oral fluid intake
- Decrease the strength of the dialysis fluid
- Contact the PD unit if unable to increase weight or relieve symptoms.

SLOW INFLOW OR OUTFLOW OF DIALYSIS FLUID

- If you find it is taking a lot longer to drain or fill during a CAPD exchange.
or
- If the PD machine alarms **LOW DRAIN VOLUME** or **LOW FILL VOLUME**

Please check the following:

- Clamps on dialysis bags are opened
- Clamp or valve on extension set is opened
- No kinks in the dialysis bag lines or catheter
- Ensure you have fluid in your peritoneum
- Also avoid constipation as this can hinder your catheter flow

If you have checked all these things and still have slow inflow or outflow, contact the PD Unit immediately to book a same day assessment.

CONSTIPATION

- **Constipation can cause 3 major problems** on PD patients:
 - **PD catheter obstruction** causing longer drain or fill time resulting in alarms if you are on the APD machine or may delay CAPD exchange.
 - **PD catheter migration** causing PD catheter obstruction and/or PD catheter failure.
 - **Peritonitis** causing abdominal pain and hospitalisation for antibiotics treatment. It may also result in PD catheter failure.
- Please ensure you open your bowel 1-2x everyday.
- If you are having trouble opening your bowels everyday, inform the PD nurses and/or nephrologist or go to your local chemist to ask advice for laxative use. Laxatives we recommend are:
 - Lactulose or
 - Bisacodyl or
 - Coloxyl with senna or
 - Movicol

SWIMMING

- If you want to swim, inform the PD nurses.
- You will be educated on how to secure/cover your PD catheter with a different dressing.
- Limit your swim to 1 hour only. **Do not soak.**
- Swim only in:
 - Treated private swimming pools and/or
 - Open beaches
- **Avoid swimming after severe storms**
- **Do not swim in:**
 - Public swimming pools
 - Crowded Beaches
 - Freshwater lakes or lagoons

Vigorous/Rigorous Activities

- Ensure your peritoneal cavity is empty of dialysis fluid before engaging in any rigorous or vigorous activities such as:
 - Sports
 - Lifting
 - Intimate relations
 - Running
 - Swimming
 - Exercise