

# Radiological insertion of CAPD catheter

## Introduction

This information is intended to assist you and your family prior to your admission for insertion of a CAPD (Tenckhoff) catheter. If you require further information or have any questions, please do not hesitate to contact the nursing staff on the CAPD Unit on 0118 322 8555.

## In the lead up to the procedure

- Swabs will be taken from the nose to detect *Staphylococcus aureus*, which is a naturally occurring bacterium that lives on the skin. It is present in approximately 30% of the population. If the swabs are positive or results unavailable, you will be prescribed a nasal cream and antibacterial wash for 5 days.
- You will commence Docusate Sodium (stool softener) and Senna (stool stimulant) this promotes a regular bowel habit prior to the catheter insertion. A regular bowel habit reduces the risks of CAPD catheter failure caused by constipation.
- 48 hours prior to the catheter insertion stop the Docusate Sodium and Senna. Take 1 sachet of Picolax – a powerful bowel cleansing medicine. Clearing the bowel assists in the catheter insertion and minimises any associated risks.
- Mix Picolax with a small glass of water and stir. Drink once it has stopped fizzing (it will get warm). It will often work within approximately two hours and is quite powerful so make sure you are near a toilet.
- It is important to take the laxative even if you have a regular bowel habit. A clear bowel makes the procedure easier and safer. If you are known to have any existing bowel problems or are already experiencing loose stools inform the nursing staff, alternative arrangements can be made.

## Before your admission

You will be asked to have the following:

- Blood test, a few days before the procedure.
- Physical examination by a doctor to check your general health.
- The staff will need to know how effective the laxative has been. If one sachet of Picolax has not been effective a second may be needed.
- The evening or morning of the procedure you will be asked to shower using an anti-bacterial wash. This will be provided by the unit when you attend your pre-procedure assessment appointment.

### Useful items to bring with you

- A packed lunch - drinks will be provided.
- Reading matter.
- Medications in their original packaging.
- Dressing gown.
- Overnight bag with nightclothes and toiletries. These are suggested as a precaution, in case the consultant wishes you stay for overnight monitoring.
- Pyjama bottoms, tracksuit bottoms or leggings for your comfort and dignity.

The majority of cases are discharged home the same day between 4-5pm.

### On the day of the procedure

- You must have nothing to eat or drink after 12 midnight.
- You can drink a small amount of water to take your tablets with at 6am, including diabetic tablets. If you are a diabetic please do not take your insulin injection but bring it with you. This can then be administered when you return to the ward and are able to eat and drink.
- Please arrive on Albert Ward, Level 2 North Block, for 7.30am on the morning of the catheter insertion, where you will be prepared for the procedure.
- It would be helpful if you could note where your waistband and your underclothes sit and to have given some thought to where you would like the catheter positioned.
- On admission to hospital you will have a cannula (a fine tube) usually inserted into the back of the hand, through which you will be given a dose of antibiotics.
- You will be required to empty your bladder as near to the time of the procedure as possible. The actual procedure will take place in the main X-ray department (Level 1 Centre Block).

### Inserting the catheter

The procedure will be performed under a local anaesthetic. This means you will be awake throughout but the skin on your abdomen will be numbed. If you are anxious, a mild sedative can be prescribed. The Tenckhoff catheter is inserted into the peritoneal cavity through a very small cut (about 1cm) in the middle of your abdomen using x-ray guidance. At this stage, the catheter is tested to make sure it works. The whole procedure usually takes about one hour.

### After the procedure

You will go to the X-ray recovery area for approximately 2 hours where your blood pressure and pulse will be checked regularly and the wounds observed. You will then be transferred back to Albert Ward to complete another 4 hours bed rest. You will be able to eat and drink as normal once the procedure is completed. You should be able to go home between 4-5pm after being reviewed.

## Side effects

There may be some bruising on the skin of the abdomen but this will disappear. Occasionally, the tube does not work well enough for dialysis and has to be removed. Very occasionally, the bowel or a blood vessel is punctured by the needle during the procedure. This usually requires no further treatment but sometimes an operation may be necessary. Serious side effects are rare. The majority of people have no problem during or after the procedure and have a successful working CAPD catheter.

## Wound care

You will have two small wounds - a site where the catheter exits the abdomen and a puncture site where the catheter was introduced. Both sites will have a dressing on and these will be checked before you leave hospital.

## On discharge

We do not routinely provide painkillers to take home so we would recommend that you make sure you have a supply of *Paracetamol*, which can be taken as directed on the packet. We generally recommend that any renal patient avoid anti-inflammatory drugs (e.g. *Ibuprofen*, *Nurofen* and *Brufen*) as this group of drugs can be damaging to remaining kidney function. Any tablets containing Codeine should be avoided to prevent catheter malfunction.

## Driving

You should not drive for at least 2 weeks while the wound is still healing and it is advisable to check with your motor insurance before resuming driving.

It is essential you don't drive yourself home and that a responsible adult is with you overnight on the day of the procedure. If this is not possible you will require an overnight stay in hospital.

## Personal hygiene

The abdominal wounds must be kept clean and dry. Avoid bathing and showering for approximately 2 weeks post procedure; please discuss this with the CAPD staff at each review. The wounds need to have healed prior to any showering to minimise the risk of infection. Always ensure the exit wound is covered and the catheter is well anchored to prevent pulling.

## At home

It is important that you rest as much as possible to aid healing and enhance the efficiency of the catheter. Do not lift heavy objects. It is important to maintain regular bowel movements to prevent catheter malfunction.

## Going back to work

Ideally it is best to rest as much as possible although we do encourage you to resume your usual daily activities. How you feel is very individual and we recognise the fact that some people require more time off than others. You are the best judge of how you feel.

## When do I start dialysis?

When you start dialysis is dependent on your blood results and how you feel.

Ideally, we like to rest the abdomen for 1-3 weeks prior to starting but this is not always possible. Your training will take place on a daily basis on the CAPD Renal Unit at the Royal Berkshire Hospital, usually week 2 after your catheter was inserted. The training will take approximately one week. Please make plans for storing your dialysis fluid and supplies. The delivery will be made within a few days of the catheter being inserted.

## What else will I need prior to starting dialysis?

- A wipeable surface (e.g. a plastic tray).
- Bathroom digital scales.
- A hook to hang up the dialysis fluid.

If you have further questions following this information handout, please do not hesitate to ask the CAPD staff.

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This document can be made available in other languages and formats upon request.

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