

Removal of a haemodialysis tunnelled catheter

Your doctor will have discussed with you that it is necessary to remove your haemodialysis tunnelled catheter. This leaflet explains why and how this is done.

Why am I having my tunnelled dialysis catheter removed?

There are many reasons why your tunnelled dialysis catheter is to be removed such as:

- It is no longer required (i.e. your fistula is ready to use or your kidneys have recovered).
- Infection.
- Thrombosis (blood clot).
- Line blockage.

If you are unsure about the reasons for the removal of your line, please ask your nurse or doctor.

Who will remove the catheter and where will it be done?

A kidney specialist doctor (consultant or registrar) will carry out the procedure and although he or she may be different to the one who recommended the procedure to you, they will be happy to answer your questions. It will be carried out on Albert Ward at the Royal Berkshire Hospital under local anaesthetic, so you will remain awake. You can have a light early breakfast and then we ask you to have nothing to eat or drink until after the procedure.

Will I need a blood test?

Blood tests will be taken to ensure that your blood will clot normally after the procedure. If you are already on dialysis then the blood test can be taken in the unit prior to the procedure date, otherwise we will make arrangements for you to have this blood test done prior to the day of the procedure.

Should I continue to take my warfarin, aspirin or clopidogrel?

If you are on warfarin you will be asked to stop this a few days prior to the line removal and your doctor may also ask you to switch to tinzaparin, which is injected beneath your skin. Your clotting levels (known as INR) will be monitored in the dialysis unit or by your GP.

Your doctor will decide whether you need to continue to take aspirin or clopidogrel or whether you can temporarily stop these prior to the procedure.

I am diabetic, should I take my tablets/insulin prior to the procedure?

Yes, you should take your tablets and/or insulin as normal with the light early breakfast.

I am on blood pressure tablets, should I take these prior to the procedure?

Yes, you should take your tablets as normal.

How is the tunnelled dialysis catheter removed?

- The nurse or the doctor from the renal unit treating you will arrange an appointment for this to happen. For safety reasons the line is not easily pulled out because the cuff in the tunnel adheres to the underneath layer of the skin and will need to be gently released.
- The area of skin around the cuff will be cleaned and numbed with a very small injection of local anaesthetic so that the procedure is not painful. This injection stings slightly, but the skin goes numb very quickly.
- When it is completely numb, the doctor will make a small cut in your skin to allow the cuff to be loosened from underneath the skin. You may feel a bit of pressure, but it will not hurt.
- Once the cuff is freed, the line will come out easily. The doctor will gently press where the line went into the vein (under your neck) for about 5 minutes.
- You will then have 2-3 stitches in your skin and you will be asked to rest on the bed for approximately an hour or longer if there is some bleeding. A dressing will be applied over the wound which should remain in place for 48 hours and be kept clean and dry. After this time, the dressing can be changed. If you are unsure how to change this dressing, please discuss this with a nurse.

How long it will take?

It is not easy to predict how easy or complicated the procedure will be. This is influenced by how easy it is to free the cuff underneath your skin; however, usually the whole procedure will not last longer than 20-30 minutes.

When and who will remove the stitches?

The stitches should be removed after 7-10 days. A qualified nurse such as a practice nurse (at the GP), community nurse or nurses from the renal unit can remove them. You will need to book this in advance at a date and time convenient to you or during your dialysis session.

Can I drive straight away?

We would advise that you don't drive home after the procedure, but you will be able to drive the following day.

Wound care

The wound must be kept clean and dry. Avoid bathing and showering and always ensure that the wound is covered with a clean dressing until the stitches are removed.

What should I look out for?

- Bleeding – A little spot of blood on the dressing is to be expected, but if the dressing becomes soaked with blood, please contact your nurse/doctor. Apply gentle pressure for 5 minutes while you contact us for advice.
- Redness / soreness – When the local anaesthetic wears off, the area may feel and look a bit bruised. 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. Please discuss what light painkillers may be best for this with your nurse/doctor.
- Swelling / discharge – A small amount of puffiness after the removal is to be expected, however, if there is any increased swelling or discharge, please contact your GP, doctor or nurse in the renal unit for further advice.

Finally...

We hope that you have found this information helpful. Please remember that you are free to ask the doctor as many questions as you wish. You must be satisfied that you have received enough information about the procedure before you sign a consent form.

Contacting us

If you have any queries or concerns about the procedure, please do not hesitate to ring us. Monday-Friday (except bank holidays) 9am - 5 pm, please contact one of Renal Unit nurses on 0118 322 7322.

At all other times or if the above number is unavailable please ring the hospital switchboard on 0118 3225111 and ask for the on call renal registrar.

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