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Outcomes of peritoneal dialysis catheter left in place after kidney transplantation

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Background: No clear consensus has been reached regarding the optimal time to remove peritoneal dialysis catheter (PDC) after kidney transplantation (KT). This study was undertaken to evaluate the clinical outcomes and potential complications associated with PDC left in place after KT.

Methods: Retrospective observational study conducted in a single peritoneal dialysis (PD) unit, which included all PD patients who received a KT during 1995-2015. Main demographic and clinical parameters of prognostic interest were recorded and used to analyze PD catheter related complications.

Results: 132 PD patients who received a KT (mean age 50 ± 12 years, 69% male). Twenty patients were excluded from the study: 17 patients due to early removal of the PDC (12 had active infection of the exit site or surgical difficulties at the time of grafting and 5 had surgical transplant complications in the early post-transplant period before hospital discharge) 3 patients who had non-functioning KT and could return to PD. Of the remaining 112 (85%) patients with functioning KT were discharged with their PDC left in place, and had it removed in a mean interval of 5 ± 3 months from KT, after achieving optimal graft function. During this follow-up period, 7 patients (6%) developed exit site infection and 2 cases (2%) peritonitis; all of them were successfully treated.

Conclusion: Delayed PDC removal after KT is associated with low complication rates, although regular examination is needed so that mild infections can be early detected, and therapy promptly instituted.

Biography

Saul Pampa-Saico is currently working as Nephrologist & Research Assistant in the Hospital Universitario Ramón y Cajal. He has published more than 20 papers in reputed journals.

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