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Challenges facing ambulatory continuous peritoneal dialysis, nursing experience

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Peritoneal dialysis is a technique that employs the patient's peritoneal membrane as a dialyzer. Excess body water is removed by an osmotic gradient created by the high dextrose concentration in the dialysate. Wastes are removed by diffusion from peritoneal capillaries into the dialysate. Patients with end stage renal disease may need Renal Replacement Therapies (RRT). Hemodialysis, peritoneal dialysis and kidney transplant are the treatment options available for AKI and CKD patients. In our setting, hemodialysis is commonly preferred among most nephrologists and even patients themselves. In CKD adult's population, peritoneal dialysis will be indicated when the patient has multiple access failure. When the patient's life is in danger PD may be initiated and several obstacles have been hindering the success of this program. In some instances, urgent peritoneal dialysis is needed. But there was no CAPD catheter at the hospital and the only experienced surgeon had retired. We have to call him and arrange for logistics for hiring him. After CAPD catheter is inserted, most patients are at greater risks of developing infections (peritonitis). Infection remains the most significant cause for morbidity in patients receiving chronic peritoneal dialysis. Peritonitis and exit site infection. Risk of inadequate dialysis occurs due to loss of permeability of the peritoneal membrane.

Biography

Oswald Wandwe has pursued his graduation in Nursing from a University of Dodoma, Tanzania. He was trained as Peritoneal Dialysis Technician from Artemis Hospitals in India. He is currently working at Muhimbili National Referral Hospital, Dar es Salaam Tanzania as Peritoneal Dialysis Nurse.

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