Tenckhoff Catheter Insertion

Information for patients with chronic kidney disease (CKD) who have chosen to have peritoneal dialysis

Renal Directorate

Produced: May 2010
Review date: May 2012
This leaflet will help you understand what to expect before having a Tenckhoff catheter inserted. You will be asked to sign a consent form before the procedure takes place, therefore it is important to discuss the procedure fully with your doctor or specialist nurse before you give your consent.

What is a Tenckhoff catheter?

A Tenckhoff catheter is the name given to a soft narrow tube that is inserted into your abdomen for peritoneal dialysis. A picture of a Tenckhoff catheter can be found on page 3 of this leaflet.

Why do I need a Tenckhoff catheter?

Blood tests have shown that your kidneys are no longer working properly and they are unable to remove toxins and excess fluid from your blood. You have chosen to have a home-based treatment in the form of peritoneal dialysis.

Peritoneal dialysis works by draining fluid into the peritoneal space that naturally occurs within the abdomen. The lining of the peritoneum acts a filter. Draining special dialysis fluid in and out of your abdomen helps to remove toxins and excess water from the body.

Who decides when I need the operation?

Your consultant will inform you when the time has come for your operation. This will depend on your blood results and how you are feeling. Once a date has been set you will be telephoned and sent a letter to confirm the date and time of your operation.

Where is the operation done?

Normally the operation is performed on the renal unit at Preston under local anaesthetic (so you will remain awake). However, there may be occasions when some people require a general anaesthetic. A consultant surgeon normally performs the procedure.

Will it hurt?

When the local anaesthetic is injected it will sting, but this soon wears off. Within a few minutes the skin and deeper tissues should then feel numb. If the procedure does become uncomfortable for you, please tell the doctor or nurse who is with you so that you can be given more local anaesthetic.

If you would like some sedation to help you relax during your operation it is important that you inform your ward nurse when you are admitted.

After the anaesthetic has worn off, you may feel some discomfort where the skin has been cut. Most people need to take a mild painkiller, such as paracetamol. If you need a strong painkiller when you return to the ward after your operation, please ask the nurse looking after you for this.
Photograph showing the position of the Tenckhoff catheter
What are the alternatives to having this procedure?

A Tenckhoff catheter is essential for peritoneal dialysis. The treatment cannot be performed without it.

There is another form of dialysis, called haemodialysis, which is an alternative to peritoneal dialysis. Your renal doctor will have discussed the different types of dialysis at your clinic appointments. You should also have had the opportunity to speak to a specialist nurse from the pre dialysis team before deciding which form of dialysis will suit you best. Other surgical procedures are necessary for haemodialysis.

If you have any further questions you should discuss this with your doctor or specialist nurse.

Do I need to do anything before I come in for the operation?

A nurse from the pre dialysis team will contact you when the letter informing you of your operation date has been sent. She will arrange to see you to discuss all the things you need to do for your operation and give you the medicines you will need for this.

It is important that you are not even slightly constipated before your operation. Constipation can lead to problems draining the fluid in and out of the Tenckhoff catheter. To help empty your bowels you will be given some laxatives, which you will need to take every day for at least 5 days before your operation. You will also be given another stronger laxative to take on the day before your admission to hospital. This is different to the laxatives you will have been taking for five nights. As a result of this medicine you may find that you feel you have your bowels opened frequently. One of the pre dialysis nurses will contact you the day before you are admitted to hospital, to advise you about this.

You will also be given a body wash that you will need to use for five days prior to admission for your operation. You will also be given cream to apply to the inside of your nose. This is to reduce the risk of infection.

If you are having the operation done under general anaesthetic you will have to attend a separate appointment at the pre operative assessment clinic.

If you are taking medicines:

You should take all your usual medication as normal, unless your surgeon or nurse tells you not to.

It is important to tell your doctor or nurse if:

- You bruise easily, or have previously had severe bleeding after surgery or dental work
- You are taking any tablets that can affect bleeding, such as Aspirin, Clopidogrel, Dipyridamole (Persantin) or Warfarin. If you are taking any of these medicines
you will need specific instructions. If you are taking any of these medications the pre dialysis nurse will discuss with you when to stop taking these at your appointment with her before your operation. Your doctor will inform you when to start taking this medication again after the operation.

What happens when I come into hospital?

Usually you will be admitted to Royal Preston Hospital on the day of your operation. A bed will be booked on a ward and you will be informed by letter of this. You should come prepared to stay in hospital for one night, although in the unlikely event of complications you may be required to stay in longer. It is advisable that you bring all your medication with you.

How long will the operation take?

Tenckhoff catheters are normally inserted in the theatre on the renal unit and the operation takes approximately 45 minutes.

What happens on the day of my operation?

Surgery is normally scheduled for the afternoon. You will be able to eat a light breakfast before coming into hospital. A light breakfast consists of cereal or toast and a drink. Following this you may drink clear fluids up until 11am on the morning of the operation. After that you must not have anything to eat or drink. If you need to take any regular medication after 11am, please ask the ward staff about taking this.

You will need to shower on the morning of surgery with the body wash that is provided by the pre dialysis team. After your shower you will need to put on a theatre gown.

As you will be given antibiotics in theatre to prevent infection after surgery, you will need to have a small needle (venflon) placed in your hand before you go to theatre.

If you have a fistula it is important that all veins in the lower arm are protected as much as possible. Therefore it is important that you remind staff who may need to take blood, insert needles or measure blood pressure from your fistula arm that you have a fistula and that your fistula arm should not be used for any of these procedures.

What happens after the operation?

You will need to stay in bed for a minimum of four hours following your operation. If you feel any discomfort after the anaesthetic has worn off, please ask the nurse looking after you for further pain relief.

The home therapy nurses will visit you on the ward to flush the Tenckhoff catheter the day after your operation. This is done by using the catheter to drain warm dialysis fluid in and out of the peritoneal space, which lies within the abdomen. The flush is required to ensure that the catheter is working.
The fluid that is drained out may be pink. This is normal at first and is due to slight bleeding after the operation and usually clears after 48 hours.

**What are the risks or complications?**

With any medical procedure there is a risk of complications and it is important that you know what these are. Insertion of a Tenckhoff catheter carries a small risk of complications, which can be increased if you have a general anaesthetic.

The main risk following surgery is bleeding from the operation site, but this usually stops after a short time. In a small number of operations, the wound bleeds under the skin and this causes swelling and bruising (haematoma). Rarely, bleeding may continue and a further operation may be needed but usually the swelling and bruising subsides over time.

The position of the Tenckhoff catheter is close to the bowel and bladder and on extremely rare occasions these may be punctured. This would require further surgery.

Infection of the wound may occur following surgery. On very rare occasions infection may occur inside the peritoneal space within the abdomen (peritonitis). Antibiotics would be needed on both occasions.

**When will I be able to go home?**

Normally you will be discharged home the day after your operation. Occasionally it may be necessary for you to remain in hospital for longer. If this happens, the home therapy team will explain the reasons for this.

**Information on discharge**

**Pain** It is normal to experience some discomfort following your operation. If the pain continues or becomes worse it is important that you contact the home therapy team immediately (telephone number at the end of leaflet).

**Nasal Cream** To reduce the risk of infection you will be given nasal cream that you will need to use for 5 consecutive days for as long as the catheter.

**Bowel Care** The success of peritoneal dialysis depends upon a clear bowel, as the Tenckhoff catheter lies against the bowel wall. Constipation can cause problems with the flow of the fluid in and out. You may need to continue taking laxatives to keep your bowels regular.

**Rest** It is important following surgery that you take time to recover as you will have internal stitches. These will dissolve in time, as will the external stitches.

**Post operative care of Tenckhoff catheter** This is done by the home therapy team, who will arrange more appointments for you before you go home.

You will be asked to attend either the training unit at Chorley and South Ribble District General Hospital or the renal unit at Royal Preston Hospital. If you live in
Cumbria you may be visited at home by a renal nurse, or asked to attend your local hospital for these appointments. This is to allow for regular flushing of the Tenckhoff catheter and for your wound dressing to be changed.

**Training**  This usually takes place in your own home. Your training will commence approximately two weeks after the insertion of your catheter. The nurses will confirm the dates with you.

**Frequently asked questions**

**How long will it be before I can drive?**

You should avoid driving for a minimum of two weeks. This will give the wound sufficient time to heal. If this is going to be a problem for you, please discuss this with your doctor or nurse.

**How will I get to the hospital?**

If you have no relatives or friends to bring you to the hospital then transport can be arranged. Please discuss this with the home therapy nurses.

**What happens if the dressing falls off?**

You should contact the home therapy team as it is likely that you will be asked to attend the unit at your local unit to enable your exit site to be redressed.

**Can I have a bath / shower?**

Not until you have been shown how to change the dressings covering the wounds. The first 14 days are crucial to the healing process and damp or wet conditions can cause infection. The home therapy nurses will give you further advice if your training is postponed.

**When can I return to work?**

We recommend that you do not return to work for at least 4 weeks following the operation. If this is not possible and you need to return sooner, please discuss your circumstances with the home therapy nurses.

**Lifting is part of my work. Will this be a problem?**

Having a Tenckhoff catheter inserted into the peritoneal space may weaken the abdominal muscles. You are advised not to stretch excessively or lift heavy objects. Please ask the home therapy team for further advice when you attend for your dressing changes and flushes.

**Will I still be able to go swimming?**

Yes. Once you have completed your training and have been shown how to look after your catheter exit site.
Do I need to start getting anything ready at home?

You will already have had a home visit by the community renal nurses and the room that you will be using for your supplies and dialysis will have been identified. During the visit to your home the nurse will discuss with you the equipment you will need and give you advice about how to prepare the room or dialysis area, ensuring it is clean and tidy.

How can I contact you if I need to?

Contact numbers between the hours of 7am – 8pm

Home Therapy Office (Royal Preston Hospital) 01772 522821
Training unit - Chorley Hospital 01772 247565
Home Therapy Manager 01772 523746
Pre Dialysis Team (Monday-Friday 8am – 5pm) 01772 522902

Out of hours calls please contact:

The Renal Ward (Ward 25) – 01772 522522

Sources of further information:

www.lancsteachinghospitals.nhs.uk
www.nhsdirect.nhs.uk
www.patient.co.uk
www.kidney.org.uk

Lancashire Teaching Hospitals NHS Foundation Trust is not responsible for the content of external internet sites.
Please ask if you would like help in understanding this information or need it in a different format.

Chinese

如果你需要帮助使能明白这些信息的内容，或者需要另一种的格式，请你提出这个要求。

Polish

Na życzenie możemy zapewnić pomoc w zrozumieniu tych informacji lub udostępnić je w innym formacie.

Spanish

Por favor díganos si necesita ayuda para entender esta información o la necesita en un formato diferente.

Gujarati

જો તમને આ માહિતી બીજી વાખામાં સમજવામાં મહત્વની હોય અને તે બીજી વાખામાં જોઈને થયે તો, હમેશા કરીને કહો.

Russian

Скажите нам, если Вам необходимо объяснение этой информации или она нужна Вам в другом формате.