On-line education from the EDTNA/ERCA Education Board
Topic for May 2003
Peritonitis and Exit-Site Infections

This is the sixth in the series of on-line educational initiatives from the Education Board. You are invited to review the following websites and/or articles from the Internet. Sections 1-4 describe different ways to avoid PD-peritonitis by the help of technical improvements, and patient selection. Sections 5-9 describe the ways in which the exit site can be kept healthy. Section 10 gives details of PD journal abstracts that can be viewed on-line.

If you are updating your knowledge and wish to include the number of learning hours that you have spent on this work, complete section 11 below and then include your answers in the EDTNA/ERCA Professional Portfolio that is available free to members from EDTNA/ERCA Head Office (translated into nine languages). See the following EDTNA/ERCA journal for further details


Abstracts and papers
1. To reduce the risk of peritonitis you have to focus on connectology, patient training, type of catheter, exit-site care, patient selection, and other topics. This author stresses the importance of well-trained dedicated nurses who are able to relate to the patients, but also well-trained nephrologists. Hygienic aspects of care are described as well as catheter designs.
Antonios H. Tzamaloukas. Improved technology reduces the risk of PD-Associated Peritonitis.
Link to full text: http://www.multi-med.com

2. Despite technical improvements and prophylactic measures, peritonitis remains a challenge and is also the most common cause of patient drop-out from PD. This article describes different strategies to keep the peritonitis rate as low as possible, by positive patient selection, careful patient training, infection prophylactics and therapy protocols.
Low Peritonitis Rate Leads to High Patient Survival and Technique Success: the First Five Years of a Peritoneal Dialysis Program. Link to full text: PDI, January 2002, VOL. 22 . No 1
http://www.pdiconnect.com

Link to full text: London Health Sciences Centre, Victoria Campus, Westminster Site.
http://www.lhsc.com
4. This paper put a stress on the PD-system used, and summarises the different connections from spike via Y-set to double-bag disconnect system. Also the type of PD-solution is discussed as a possible source of infection. The CARI Guidelines (Caring for Australians with Renal Impairment) draft discussed at the DNT meeting in March 5-7, 2003.


5. Practical advice how to care for the exit site in the post-operative phase and after some time. You will find ideas about how to prevent trauma, how to protect the catheter, and how to avoid catheter-related infections. Barbara Prowant: Lifestyle Tips. Peritoneal Dialysis Catheter Exit Site Care.

Link to full text: [http://www.ikidney.com](http://www.ikidney.com)

6. The possible complications that can occur after PD catheter insertion.

7. Very practical advice how to protect the exit site when taking a shower. Chronic PD-Catheter Exit Site Care. Shower technique for the healthy exit site.
Link to full text: [http://www.isp.org/guidelines/quality/shower.doc](http://www.isp.org/guidelines/quality/shower.doc)

8. Perhaps you did not know that artificial nails could harbour potentially fatal germs? Brenda Youngblood. Potentially Fatal Germs linked to long and artificial Nails
Link to abstract: [http://www.pdserv.com](http://www.pdserv.com)

9. Other Recommended literature
10. Journals

- Peritoneal Dialysis International: abstracts freely available: http://www.pdiconnect.com/
- Advances in Peritoneal Dialysis: abstracts freely available: http://www.advancesinpd.com/

11. Evaluation

- What is the peritonitis rate / exit-site infection rate at your unit? Have you analysed the reasons why the rate is higher/lower than average? Would some of the ideas discussed in these papers be of help to lower the risk of peritonitis or exit site infection?
- How much do you advise patients on the possible complications of PD? Reflect on your teaching of patients about peritonitis/exit-site care and list the ways in which you could improve your patient education/training programme on these topics.

Reflection

- How many learning hours have you spent on reading and reviewing the websites/articles/abstracts?
- Which was the most useful article/abstract that you reviewed, and why?
- How does this most useful article/abstract relate to your work and how has it or will it inform and influence your practice?
- Is there any further learning that you have identified that you may do related to this topic?

We hope that you have enjoyed the sixth of our on-line educational programmes. Please address any queries or questions to Head Office. I would like to thank André Stragier, the EDTNA/ERCA Communication and Publication Relations Officer for his invaluable help and support in searching the internet for appropriate websites and articles. The next topic will be nephrology nursing research, to be published on the Homepage in June 2003.

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30 April 2003