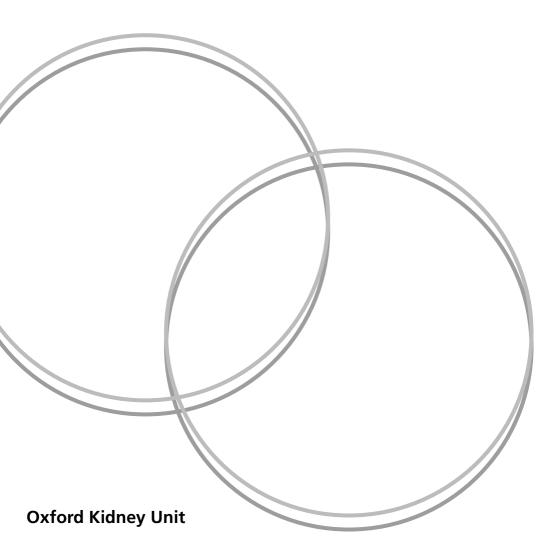


Peritoneal dialysis (PD) peritonitis

Information for patients



What is PD peritonitis?

PD peritonitis is one of the complications of peritoneal dialysis. Peritonitis is inflammation of the lining (peritoneum) surrounding your abdominal organs. It is usually caused by bacteria (germs) that have entered your abdomen either from your skin, PD catheter or from inside your body through your bowel.

How will I know if I have PD peritonitis?

Your PD fluid will be cloudy. You may also have diarrhoea or severe constipation a few days before your fluid turns cloudy, and then abdominal pain and possibly a high temperature.

What should I do if I have PD peritonitis?

You will need to be seen in your local PD Unit or in Oxford for immediate treatment. If you don't have transport your PD or Renal nurse will organise this for you. Receiving treatment quickly will help treat the infection.

When you come to hospital your PD or Renal nurse will send a sample of your PD fluid to Pathology, so they can test it to see what bacteria is growing. You will then be given two antibiotics; one will be added to your PD fluid and the other will be a tablet to swallow.

What antibiotics will I be given?

You will need to take two antibiotics to begin with:

Vancomycin

Vancomycin will be added to a warm bag of PD fluid and drained into your abdomen. It must be left inside your abdomen for a minimum of 6 hours, to ensure the antibiotics have been absorbed into your blood system.

Will I experience any side effects from this antibiotic?

Contact your **PD or Renal nurse immediately** if you have any of the following symptoms:

- redness (flushing) and itching of your upper body
- low blood pressure
- hearing problems
- signs of an allergic reaction, such as a skin rash.

Ciprofloxacin

Ciprofloxacin is a tablet. It is from a group of antibiotics known as a fluoroquinolones. You will be given a 5 day course to take. You need to take a 500mg tablet immediately, then one 500mg tablet twice a day for the next 5 days.

Will I experience any side effects from this antibiotic?

If you experience any of the following side effects, please contact your **PD nurse or the Renal Unit immediately**:

- tendon pain or swelling, often beginning in the ankle or calf
- pain in your joints or swelling in your shoulders, arms or legs
- worsening abnormal pain or sensations (such as persistent pins and needles, tingling, tickling, numbness, or burning)
- weakness in your body, especially in your legs or arms, or difficulty walking
- worsening severe tiredness, depressed mood, anxiety, problems with your memory or severe problems sleeping

• changes to your vision, taste, smell or hearing, which are worse than usual.

If you need further information, please see the Medicine and Healthcare products Regulatory Agency (MHRA) leaflet: https://assets.publishing.service.gov.uk/ media/5c9364c6e5274a48edb9a9fa/FQ-patient-sheet-final.pdf

Before you are given the ciprofloxacin, your PD nurse or kidney doctor will ask you about any medication you are taking. If you are taking a corticosteroid (such as hydrocortisone and prednisolone) this can increase the risk of tendon problems.

Is there anything else I need to know when I am taking ciprofloxacin?

- It is important not to take this medication at the same time as your phosphate binders (e.g. Calcichew, calcium acetate (Phosex), Alucaps, sevelamer (Renagel), lanthanum (Fosrenol)) or iron tablets, as these will affect how well the antibiotic works. Take the ciprofloxacin two hours after any phosphate binder or iron tablets.
- Avoid eating or drinking dairy products at the same time as taking the ciprofloxacin, as this will also affect how well the antibiotics work. Wait four hours after having any dairy products.

Always read the leaflet that comes with your medicines (ask your pharmacist for a leaflet if you did not receive one). Talk to your kidney doctor or PD nurse if you have any questions about your medicines.

What else do I need to know?

The inflammation of your peritoneum may increase the amount of protein removed from your blood into the PD fluid. You should increase the amount of protein in your diet for a few days. If you need advice from a dietitian their telephone number can be found on page 7 of this leaflet.

During the episode of PD peritonitis you may notice the amount of fluid you drain out of your abdomen is less than usual. You may also experience ankle/leg swelling or shortness of breath. Your blood pressure may be higher than usual.

If this happens, use some stronger strength glucose PD fluid for the next few days (2.27% (green) Baxter or 2.5% (green) Fresenius). Reduce the amount of fluid you drink until things settle down.

If you have abdominal pain or discomfort, take a mild painkiller such as paracetamol. Take them as advised on the packet. The pain should settle within a day or so.

Your PD fluid should start to clear and symptoms improve within 2-3 days. Your PD nurse will telephone you daily to ask you how you are feeling. If your PD fluid remains cloudy, or clears and then becomes cloudy again, you have more pain, or develop any other symptoms, please contact your PD nurse or the Renal Unit for advice. Telephone numbers are at the end of this leaflet.

What happens about transplantation?

If you are waiting for a kidney transplant you will need to be temporarily suspended from the waiting list until your PD fluid is clear (about 2-5 days). This suspension will not disadvantage you on the transplant waiting list, as you will still gain points for waiting time.

How long do I need treatment for?

The antibiotic you need to continue having will depend on the type of bacteria in your PD fluid. Your PD nurse will let you know which bacteria is present and which antibiotic to continue with.

Vancomycin

If you need to continue having vancomycin you will need to see your PD nurse on the 5th day (6 days) after your first dose of antibiotic. They will take a blood test to check the level of vancomycin in your blood.

Your PD nurse will give you a CAPD bag with the vancomycin added to it to take home.

When your PD nurse has the vancomycin level result, they will advise you when to do the next **'vancomycin added' CAPD exchange**. Please keep the CAPD bag with the vancomycin added refrigerated, until your PD nurse lets you know when to use the bag. You will need to warm the fluid before you drain it into your abdomen, either on your bag warmer or Homechoice machine.

You will need to continue the vancomycin antibiotic treatment for a minimum of 2 weeks, sometimes 3 weeks if your PD fluid has grown more resistant bacteria. This will mean a total of either 2 to 4 CAPD bags with added vancomycin.

Ciprofloxacin

If you need to continue taking ciprofloxacin, your PD nurse will arrange with your GP for a prescription for a further 9 day course (14 days in total).

You will need to see your PD nurse 2 weeks after you have completed the antibiotic treatment/s. They will send a sample of your PD fluid to Pathology again and take a blood test. This is to make sure the infection has been completely treated.

2nd visit (5 days later) Further visits will be organised according to the results of the blood test taken on this day.

Useful contact numbers

Oxford PD Unit

Tel: 01865 225 792

Answerphone service (8.30am to 6.00pm, Monday to Friday). A PD nurse will respond to your message within the hour.

Milton Keynes PD Unit

Tel: **01908 996 495** Answerphone will give you the PD nurse details

Wycombe PD Unit

Tel: **01494 426 349** Answerphone will give you the PD nurse details

Swindon PD Unit

Tel: **01793 605 288** Answerphone will give you the PD nurse details

Renal Ward

Tel: 01865 225 780

This is for urgent calls, 24 hours a day, on weekdays, weekends and bank holidays when the PD nurses are not available.

Dietitians

Tel: 01865 225 061

Answerphone will give you the dietitian details

Useful websites

Kidney Patient Guide

Information for patients with kidney failure and those who care for them.

Website: www.kidneypatientguide.org.uk

Kidney Care UK

A charity which has lots of practical support and information for people with kidney disease.

Website: www.kidneycareuk.org

Oxford Kidney Unit

The website has lots of information about the Oxford Kidney Unit for patients and carers.

Website: www.ouh.nhs.uk/oku

NHS WEBSITE PatientView

This shows your latest blood results. Website: www.patientview.org

If you need an interpreter or would like this information leaflet in another format, such as Easy Read, large print, Braille, audio, electronically or another language, please speak to the department where you are being seen. You will find their contact details on your appointment letter.

Making a difference across our hospitals

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