Needlescopic insertion of a Tenckhoff catheter

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BACKGROUND

Tenckhoff catheters are used for continuous ambulatory peritoneal dialysis, but their use can result in complications.¹ Here, we report upon needlescopic insertion of a Tenckhoff catheter (Baxter, Deerfield, IL, USA) for peritoneal dialysis under general anaesthesia. The aim of this technique is to reduce the prevalence of morbidity and technical complications associated with open insertion, including omental wrapping, which can cause blockage and migration of the catheter.

TECHNIQUE

Under general anaesthesia, insertion of a coiled-tip, swan-neck, double-cuff Tenckhoff catheter starts with placement of two 3-mm

ports (Karl Storz Instruments, Slough, UK) on the contralateral side of the abdomen after induction of pneumoperitoneum with a Veress needle. Omentopexy is done with an abdominal suture passer in the ipsilateral upper quadrant. The catheter is inserted through a 1-cm incision in the skin and rectus sheath. The catheter is tunneled obliquely below the posterior rectus sheath with the aid of an 8-mm VersaStep™ trocar (Covidien, Dublin, Eire). Under direct vision, the catheter tip is directed towards the retrovesical area extremely carefully so as to avoid damage to the inferior epigastric arteries.

DISCUSSION

In our initial series of 33 patients, early complications encountered included one patient (3%) who had poor flow (due to excessive adhesions) and one patient (3%) who had a pericatheter leak.

Reference

1. Tiong HY, Poh J, Sunderaraj K, Wu YJ, Consigliere DT. Surgical complications of Tenckhoff catheters used in continuous ambulatory peritoneal dialysis. *Singapore Med J* 2006; **47**: 707–711.