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Adaptation in providing renal access surgery service in response to covid-19 pandemic- a single centre experience

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Aim: Evaluate impact of Covid-19 pandemic on renal access surgery and changes in practice towards counteracting limitations to provide safe and effective peritoneal and haemodialysis.

Methods: Retrospective review of procedures for dialysis in ESRD patients from institutional databases in a single centre was carried out. Patients undergoing peritoneal catheter insertions (PD) or AV fistula formation (HD) between March 2020 and October 2020 were compared with similar period in 2019. Demographic, procedure and postoperative outcome data was collected.

Results: Between March and October 2019, 143 combined PD and HD procedures were performed compared to 98 in the same time period in 2020. The mean age of patients was 65 ± 15 years and 62 ± 12 years, respectively. In 2020, 26 patients had PD catheter insertion and 22 patients in 2019. 18% of these were performed laparoscopically in 2019 compared to 33% in 2020. The same day discharge rate increased to 34% from 22%.

Patients having complex fistula procedures including basilic vein transpositions and grafts requiring overnight stay dropped from 83% patients ($n = 23$) to 71% ($n = 7$) in 2020.

In 2019, 80% ($n = 49$) patients had radio-cephalic fistula performed as same day procedure increasing to 98% ($n = 22$) in 2020.

Day-surgery unit utilisation increased from 55% to 71%. Same day discharge rate increased from 53% to 66%. There were no readmissions.

Conclusions: Adaptations in terms of increased support for same day surgery even for complex renal access procedures has improved service. A greater proportion of renal access service can be same day procedures avoiding inpatient stay.