

## LAPAROSCOPIC PERITONEAL DIALYSIS CATHETER PLACEMENT: TEN YEARS' EXPERIENCE AT PRINCE SULTAN MILITARY MEDICAL CITY

**Saud Al-Omani, Abd Balla, K Alswanae, A Alasmari, Bandar Safar, Mohammad Al-Jundobi, Nou/Yassin, Helayel Almodhaidi, Ghadah Alswail, Ayed Mutairi, Faleh Alomani**

Prince Sultan Military Medical City, Saudi Arabia

**Objective:** To assess laparoscopic peritoneal dialysis (PD) catheter placement techniques and complications among End Stage Renal Disease (ESRD) patients in Prince Sultan Military Medical City (PSMMC).

**Methods:** We performed a retrospective review of patients who underwent laparoscopic PD catheter placement with tunneling +/- adhesion lysis and omentopexy, between Jul' 2003 and Jun' 2013, by a single surgeon at Prince Sultan Military Medical City (PSMMC), Riyadh, Kingdom of Saudi Arabia.

**Results:** 222 patients underwent laparoscopic PD catheter insertion during the study period. Late complications encountered include: tuberculosis (TB) peritonitis in 9 patients (4%), catheter dysfunction in 13 patients (6%), adhesions in 2 patients (1%), bacterial peritonitis in 25 patients (11%), leakage in 15 patients (7%), and 16 patients (7%) developed an umbilical hernia. There was superficial fungal infection around the catheter exit in one patient (0.45%), and exit-site infection in 7 patients (3%). The catheters remained active since first insertion in 33 patients (15%), and were reinserted in 7 patients (3%). 41 patients (23%) underwent renal transplantation, and 82 (37%) patients were switched to hemodialysis. 11 patients (5%) were lost for follow up, and 45 patients (20%) died because of their chronic illness. Seven (28%) of the 25 patients with bacterial peritonitis were cured with conservative management. There was no procedure related mortality or bleeding.

**Conclusions:** Laparoscopic PD catheter insertion is safe and effective. The utilization of this technique provides a low rate of PD catheter complications. However, we encountered a noticeable rate of peritoneal tuberculosis in our patients.

shffns@hotmail.com