

Peritoneal catheter placement complications

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- [Evaluation of ultrasound-guided distal catheter placement in pediatric ventriculoatrial shunts for patients with hydrocephalus: Effectiveness and consequences](#)
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- [Percutaneous Ventriculoatrial Shunting as a Salvage Method in the Pediatric Hydrocephalus Patients with Peritoneal Problems](#)

Abdominal pseudocyst

see [Abdominal catheter migration](#).

see [Bowel perforation](#).

see [Bowel ischemia](#).

see [Ventriculoperitoneal shunt infection](#).

Delayed shunt insufficiency

Peritoneal catheter placement, typically done for peritoneal dialysis or fluid drainage, is a procedure that involves inserting a catheter into the [peritoneal cavity](#). While generally safe, there are several potential complications associated with this procedure. These can be categorized into early (immediate) and late complications.

Early Complications

1. Infection:

Peritonitis: Inflammation of the peritoneum, often due to bacterial contamination during the procedure. It presents with abdominal pain, fever, and cloudy dialysis fluid.

2. Bleeding:

1. **Hematoma:** Localized bleeding under the skin at the insertion site can occur, leading to a hematoma.
2. **Intraperitoneal Hemorrhage:** Less common but more serious, bleeding into the peritoneal

cavity can occur, presenting with abdominal pain and distension.

3. Bowel or Organ Injury:

1. **Perforation:** Accidental perforation of the bowel or other abdominal organs during catheter insertion can lead to serious complications like peritonitis or abscess formation.

4. Catheter Malposition:

1. **Tip Malposition:** The catheter tip may be improperly positioned, leading to inadequate drainage or difficulty in dialysis fluid exchange.
2. **Omental Wrap:** The catheter can become entangled with the omentum (a layer of fat overlying the intestines), obstructing flow.

5. Leaks:

1. **Peritoneal Leak:** Leakage of dialysis fluid or other abdominal fluids into the surrounding tissues, leading to subcutaneous edema or genital swelling.

Late Complications

1. Catheter Dysfunction:

1. **Blockage:** The catheter may become blocked by fibrin clots, omentum, or other materials, hindering its function.
2. **Migration:** The catheter may migrate out of the peritoneal cavity or into a position that makes it difficult to drain fluid effectively.

2. Infection:

1. **Chronic Exit-Site or Tunnel Infection:** Long-term infections at the exit site or along the catheter tunnel can lead to complications and may require catheter removal.

3. Hernias:

1. **Incisional Hernia:** The increased intra-abdominal pressure from dialysis fluid can lead to herniation at the catheter insertion site, especially if the site was not closed properly.

4. Dialysate Leaks:

1. **Dialysate Extravasation:** Persistent leaks of dialysis fluid into the subcutaneous tissues or through the catheter site can occur, leading to inadequate dialysis and potential infection.

5. Encapsulating Peritoneal Sclerosis (EPS):

1. A rare but serious complication where the peritoneum becomes thickened and fibrotic, leading to bowel obstruction and severe abdominal pain. This can occur after long-term peritoneal dialysis.

Management and Prevention

- **Antibiotic Prophylaxis:** Pre-procedure antibiotics can reduce the risk of infection. - **Proper Technique:** Ensuring proper surgical technique and positioning can minimize the risk of complications like organ injury and catheter malposition. - **Regular Monitoring:** Regular follow-up and monitoring of the catheter site for signs of infection or dysfunction. - **Patient Education:** Educating patients on how to care for the catheter site and recognize early signs of complications.

Prompt recognition and management of complications are essential to reduce morbidity and ensure the effectiveness of the peritoneal catheter.

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