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Project title

Use of 2% Aqueous Chlorhexidine Swabstick in Treating Peritoneal Dialysis Catheter Exit-site Granuloma – A Case Series Study

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Introduction

Exit-site granuloma is one the most frequent complications associated with Peritoneal Dialysis (PD) catheter. Granuloma cauterization with silver nitrate is the usual treatment in Hong Kong. However, the use of silver nitrate may cause discoloration and damage to the surrounding healthy skin. The use of 2% Aqueous Chlorhexidine (CHG) Swabstick was intended to treat the acute exit-site infection with purulent discharge before cauterization. However, it was observed in a local center that the granulomas reduced in size and finally subsided in two PD patients without adverse effect. Therefore, a case series study was conducted to examine the effect of 2% CHG Swabstick in treating PD Catheter exit-site granulomas.

Objectives

- To evaluate the effectiveness of using 2% CHG Swabstick in treating PD Catheter exit-site granulomas
- To examine any adverse effects after using the 2% CHG Swabstick

Methodology

Patients developed PD catheter exit-site granulomas were identified during followed up in the two Renal Centers in Kowloon East Cluster. All eligible patients were trained and followed up by a specialty nurse/nurse consultant. They were trained to use the 2% CHG Swabstick for daily exit-site dressing at home and were followed up within four weeks or earlier if granulomas healed to determine progress of healing after the training session . The primary outcome was time-to-granuloma subside and the secondary outcomes were adverse effects (pain, infection) of the use of 2% CHG Swabstick.

Result

Eighteen PD patients consented to join the study from the two Renal Centers from April to August 2015. Three patients dropped out because of allergy (n=1) and loss follow up (n=2). 11/15 (73%) showed good response to 2% CHG Swabstick with granulomas subsided from 3 to 28 days (mean 13.2 days). Their size of granulomas at baseline ranged from 3 x 2 mm to 10 x 7 mm. 27% (n=4) required to change to silver nitrate as little or no improvement after 14 to 25 days. For adverse effect, Numeric Rating Scale was used to assess pain: both the median and mode were 0 and the range was 0-2 out of 11 rated by eighteen patients. Four patients with exit-site infection and antibiotics were given. Conclusion: This case series study illustrated the use of 2% CHG Swabstick is effective and safe in treating PD Catheter granulomas . Prospective randomized control trial is recommended to perform in order to evaluate the efficacy of using 2% CHG Swabstick in treating the PD catheter exit-site granulomas.