Clinical Image



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Early leakage of peritoneal effluent to subcutaneous tissue after a sneeze

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We present a 54-year-old woman with chronic kidney disease stage 5, who had a peritoneal dialysis catheter since 6 weeks ago. She started the dialysis technique two days ago. After a strong sneeze, she presented mild discomfort in the area of the internal orifice of the catheter, with posterior dysfunction of the catheter and inability to recover the peritoneal fluid effluent. The vital signs were correct and the physical examination revealed painless moderate abdominal distention, without signs of peritonism. An interesting finding was the presence of a well-defined area of subcutaneous edema in the anterior abdominal wall around the subcutaneous peritoneal dialysis tract [Figures 1 and 2]. Blood tests were normal. An abdominal X-ray showed a correct position of the catheter, without signs of intestinal obstruction or perforation. A fluid leak from the peritoneal cavity to the subcutaneous tissue was suspected. In order to reduce intra-abdominal pressure, the continuation of peritoneal dialysis was delayed to facilitate healing of the internal abdominal catheter orifice. The early diagnosis of this early complication of the technique is important, since it can slow down the growth of fibrous tissue and the correct adherence of the subcutaneous cuff and can facilitate bacterial growth, being directly responsible for late fluid leaks, as well as subcutaneous or peritoneal infections.



Figure 1: A well-delimited area in the abdomen. Note the hypopigmented tone in comparison to the rest of the skin.



Figure 2: A fingerprint showing the edema produced by the leakage of the peritoneal fluid.

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