

Queen Elizabeth Hospital Birmingham



Part of University Hospitals Birmingham

NHS Foundation Trust



Information about having a haemodialysis line

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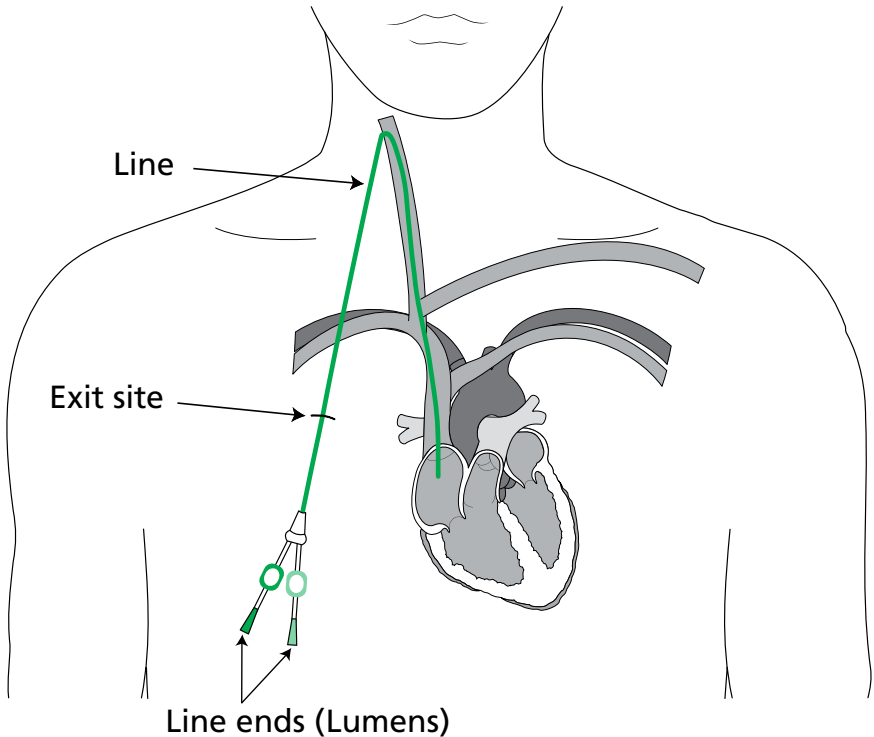
Introduction

This leaflet has been written to give you general information about having a haemodialysis line. The information leaflet does not replace discussion between you and your doctor or nurse.

If you have any questions about having a haemodialysis line please talk to your kidney doctor or one of the nurses.

What is a haemodialysis line?

A haemodialysis line is a thin, flexible plastic tube that is inserted through the skin into one of the large veins, usually in the neck or groin. Once it is in place it can be connected to a haemodialysis machine and allows blood to be pumped from your body through the dialysis machine and back again so that your blood can be cleaned.



There are 2 types of haemodialysis line that we use in the renal unit:

- **Temporary lines:** these are quick to insert and used for short periods of time (usually up to 7 days)
- **Tunnelled lines:** these take a little longer to insert but are embedded under the skin to try to prevent infections. These lines can stay in for longer amounts of time

What preparation will I need?

The main problem with haemodialysis lines is that they can get infected. Preparation is required to try to reduce the risk of infection.

You will have swabs taken from your nose, throat and groin in order to check for the presence of bacteria, including MRSA (Methicillin resistant *Staphylococcus aureus*).

Staphylococcus aureus is a common germ that is harmlessly carried in the noses or on the skin of many people. The majority of people who carry the germ have no symptoms and are unaware of it. The same can apply to people who have MRSA on their skin.

People with kidney problems are more at risk of developing infections. It is therefore important to know whether you are carrying the MRSA germ. If you have the germ, you will be given antibiotic cream for your nose and an antiseptic soap solution for you to wash with. The presence of MRSA will be checked for every 3 months while you are on dialysis.

In addition, if you are to have a new haemodialysis line inserted you will need to have a bath or shower using the antiseptic soap solution provided by the hospital or your dialysis unit on the day of the procedure.

You will be able to eat and drink normally before the procedure as the haemodialysis line is normally inserted using

local anaesthetic where you are awake. If you believe that you may need some extra medicine to make you feel more relaxed, ask your dialysis unit to contact your consultant or discuss with the doctors if you're in hospital. If you need medicine to help you relax you should not eat for 6 hours beforehand. Clear fluids can be taken up to 2 hours before the procedure.

Where will the line insertion procedure take place?

Insertion of the line will be carried out at the new Queen Elizabeth Hospital Birmingham. Some are undertaken in Ambulatory Care, others on Ward 301 and some in the X-ray department. You will be told in advance where the procedure will take place.

How long will it take?

The procedure normally takes about an hour.

How is the procedure performed?

Before the line is inserted you will be asked to change into a hospital gown and put on a hair cap. You will need to lie flat on the bed and expose the area that the doctor has chosen for the line to be placed. The doctor will find and assess your vein using the ultrasound machine. This will not hurt.

Your skin will be cleaned with an antiseptic solution. Local anaesthetic will then be injected into the skin around the vein; this stings a little but will make the skin numb in a few minutes. After this you should not feel any pain but just some pressure as the line is inserted. If you feel any pain let the doctor or nurse know and they will give you some more anaesthetic.

Once the line is inserted, it is held in place with some stitches and a protective dressing is applied.

What are the complications that may occur at the time of line insertion?

The insertion of a haemodialysis line carries a small risk of complications. The most common are:

- damage to a vein or artery from the equipment used to insert the line causing bruising, bleeding or swelling. Sometimes there is bleeding around the neck after the insertion that delays you going home
- punctured lung: if this occurs you may have to have a tube inserted into your chest for a few days to re-inflate your lung (less than 1 in 100). Very rarely (less than 1 in 1000) you may need an operation to repair the puncture
- large amount of bleeding: if the line insertion causes a lot of bleeding you may need a blood transfusion (less than 1 in 100) or very rarely an operation to stop the bleeding
- unsuccessful line insertion: sometimes the line cannot be inserted due to a blockage or narrowing of the vein which is only detected during the procedure. If this occurs, the doctor performing the procedure will explain what can be done next. Often the procedure will be rescheduled to take place in the X-ray department where special screening is available

It is important to tell the doctor doing the procedure if you have any conditions that cause you to bleed, or are on warfarin, aspirin or clopidogrel, or suffer with any allergies. Normally, warfarin will be stopped a few days before the procedure. The kidney doctor will let you know if you need to stop other medications including aspirin or clopidogrel.

The doctor will talk to you about all these complications before you sign a consent form.

Special instructions

Your haemodialysis line should only be used for dialysis treatment. If your dialysis line does not work properly it may be necessary for staff in the Kidney Assessment Team to place a medicine called Urokinase directly into your line to improve the blood flow. A separate information leaflet about Urokinase is available.

If a doctor or nurse wishes to use the line for any other purpose then please refer them to your kidney nurse or doctor.

Useful numbers

Kidney Assessment Team	07887985486
Ward 301 Acute	0121 371 3096
Ward 301 Chronic	0121 371 3011
Old Renal Dialysis Unit	0121 627 2910
Aston Cross Dialysis Centre	0121 333 6766
Tipton Dialysis Centre	0121 557 8313
City Hospital Renal Dialysis Unit	0121 507 4014
Kings Norton Dialysis Centre	0121 486 4280
Lichfield Renal Unit	01543 262363
Kidderminster Renal Unit	01562 826370
Hereford Dialysis Centre	01432 277929
Woodgate Valley Dialysis Centre	0121 421 0090
Worcester Dialysis Centre	01905 721 940

The on-call renal registrar can be contacted by ringing the Queen Elizabeth Hospital Birmingham switchboard on 0121 627 2000.

Where can I get further information?

Further information can be obtained from:

The National Kidney Federation website

www.kidney.org.uk

NHS Choices website for more information about a wide range of health topics

www.nhs.uk/Pages/HomePage.aspx

West Midlands Renal Network website

www.wmrn.co.uk

Please use the space provided to write down any questions you may have and bring this along to your next appointment

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The Trust provides free monthly health talks on a variety of medical conditions and treatments. For more information visit www.uhb.nhs.uk or call 0121 627 7803



Renal Unit
Queen Elizabeth Hospital Birmingham
Mindelsohn Way, Edgbaston,
Birmingham, B15 2WB
Telephone: 0121 627 2000

