

Scottish Renal Registry Peritoneal Dialysis Audit: audit standards and definitions

Audit Standard

The relevant audit standards are found in the UKRA “Clinical Practice Guideline Peritoneal Dialysis in Adults and Children”, published in June 2017:

<https://renal.org/wp-content/uploads/2017/06/final-peritoneal-dialysis-guideline667ba231181561659443ff000014d4d8.pdf>

The UKRA PD Guideline recommends annual audit of peritonitis, peritonitis outcome and culture negative rate of peritonitis. The method of describing peritonitis rate has been changed in the 2017 PD Guideline to bring the UK in line with most other countries; previously it was described as number of treatment months between episodes, and now episodes per patient year of PD treatment. The SRR report will initially continue to report both until units become more familiar with the new method of describing rate.

The UKRA PD peritonitis audit standards include:

- Peritonitis rate of less than 0.5 per patient year of PD treatment (equivalent to less than 1 episode per 24 months in adults and children)
- A primary cure rate of > 80%
- A culture negative rate of < 20%”

Definitions

Peritoneal dialysis associated peritonitis is diagnosed if the peritoneal effluent contains more than 100 white cells per microlitre with more than 50% polymorphonuclear leucocytes.

Relapsing peritonitis is defined as further episode of peritonitis caused by the same organism (or sterile culture) occurring within 4 weeks of completing antibiotic therapy for peritonitis.

Repeat peritonitis is a further episode of peritonitis more than 4 weeks after completing antibiotics, with the same organism.

Recurrent peritonitis is a further episode of peritonitis caused by a different organism, occurring within 4 weeks of completing antibiotics for peritonitis. [Reference Peritoneal Dialysis-related infections recommendations:2010 Update. PDI;2010:40(4):393-423].

Outcome following an episode of peritoneal dialysis related peritonitis is classified as:

- **Cure** defined as resolution of evidence of peritonitis following antimicrobial therapy and without the need for catheter removal.
- **Peritoneal dialysis catheter removal**
- **Patient death.** This includes patients who die within 28 days of presentation of peritonitis even if the effluent WCC had cleared.