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Asepsis and automated peritoneal dialysis

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To the editor: Asepsis is essential in automated peritoneal dialysis to prevent infectious complications.

Patients undergoing automated peritoneal dialysis (APD) usually have a lower risk of peritonitis as compared to

those subject to CAPD.^{1,4} However, drainage fluid is stored in an open container at room temperature. This container is washed daily with diluted sodium hypochlorite (bleach).

OBJECTIVES

To determine the contamination status of the drainage fluid collected in the container.

To assess whether this fluid storage method involves an infection risk for patients.

To ascertain whether the usual method for disinfecting containers is effective.

MATERIALS AND METHODS

Samples were taken from patients on APD at our unit for Gram staining and microbiological cultures in standard and blood culture media. A manually drained sample was collected in all cases to be used as control.

In addition, serial samples were taken from a patient subgroup to see the type of flora and whether this was sensitive to routine disinfection.

The drainage container was disinfected with diluted bleach.

RESULTS

Nine cases of patients on APD, whose containers were cleaned daily, were studied.

The fluid in the container was contaminated by a germ in 5 cases (55.5%), by 2 germs in 2 cases (22.2%), and by more than 2 germs in another 2 cases (22.2%).

Ten different germs were identified out of the total 15 germs found. Of these, 60% were Gram-negative and 40% Gram-positive organisms.

The container fluid had Gram-negative germs in 5 cases, Gram-positive germs in 3 cases, and both types of germs in one case.

Most common germs included *Serratia marcescens*, *Pseudomonas putida*, *Streptococcus agalactiae*, *Enterobacter cloacae*, and *Staphylococcus epidermidis*, all of them identified twice, while all other organisms only occurred once.

Enterobacteriaceae accounted for more than 40% of germs, while the remaining

organisms were mainly environmental germs proliferating at room temperature.

Serial samples were taken in 4 cases. When samples were taken after 24 hours, recurrence of some germ was seen in 50% of cases.

The control culture was negative in all cases.

CONCLUSIONS

All fluids in the containers were contaminated.

Forty percent of contaminants were enterobacteriaceae.

It is questionable that bleach removes contaminating germs.

Neither the container nor contaminated drainage fluid caused infection in patients.

The container is a safe but not completely aseptic model.

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Beçet's disease in a patient on haemodialysis

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To the editor: Behçet's disease is a rare inflammatory disorder of an