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Diseases & Conditions

Peritonitis

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Symptoms & causes

Diagnosis & treatment

Overview

Print

Peritonitis is inflammation of the peritoneum — a silk-like membrane that lines your inner abdominal wall and covers the organs within your abdomen — that is usually due to a bacterial or fungal infection. Peritonitis can result from any rupture (perforation) in your abdomen, or as a complication of other medical conditions.

Peritonitis requires prompt medical attention to fight the infection and, if necessary, to treat any underlying medical conditions. Treatment of peritonitis usually involves antibiotics and, in some cases, surgery. Left untreated, peritonitis can lead to severe, potentially life-threatening infection throughout your body.

If you're receiving peritoneal dialysis therapy, you can help prevent peritonitis by following good hygiene before, during and after dialysis.

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Symptoms

Signs and symptoms of peritonitis include:

- Abdominal pain or tenderness
- Bloating or a feeling of fullness (distention) in your abdomen
- Fever
- Nausea and vomiting
- Loss of appetite
- Diarrhea
- Low urine output
- Thirst
- Inability to pass stool or gas
- Fatigue

If you're receiving peritoneal dialysis, peritonitis symptoms may also include:

- Cloudy dialysis fluid
- · White flecks, strands or clumps (fibrin) in the dialysis fluid

When to see a doctor

Peritonitis can be life-threatening if it's not treated promptly. Contact your doctor immediately if you have severe pain or tenderness of your abdomen, abdominal bloating, or a feeling of fullness associated with:

- Fever
- Nausea and vomiting

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- · Low urine output
- Thirst
- · Inability to pass stool or gas

If you're receiving peritoneal dialysis, contact your health care provider immediately if your dialysis fluid is cloudy, if it contains white flecks, or strands or clumps (fibrin), or if it has an unusual odor, especially if the area around your tube (catheter) is red or painful.

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Causes

Infection of the peritoneum can happen for a variety of reasons. In most cases, the cause is a rupture (perforation) within the abdominal wall. Though it's rare, the condition can develop without an abdominal rupture. This type of peritonitis is called spontaneous peritonitis.

Common causes of ruptures that lead to peritonitis include:

- Medical procedures, such as peritoneal dialysis.
 Peritoneal dialysis uses tubes (catheters) to remove waste products from your blood when your kidneys can no longer adequately do so. An infection may occur during peritoneal dialysis due to unclean surroundings, poor hygiene or contaminated equipment. Peritonitis also may develop as a complication of gastrointestinal surgery, the use of feeding tubes or a procedure to withdraw fluid from your abdomen (paracentesis) and rarely as a complication of colonoscopy or endoscopy.
- A ruptured appendix, stomach ulcer or perforated colon. Any of these conditions can allow bacteria to get into the peritoneum through a hole in your gastrointestinal tract.
- Pancreatitis. Inflammation of your pancreas (pancreatitis) complicated by infection may lead to peritonitis if the bacteria spread outside the pancreas.

- Diverticulitis. Infection of small, bulging pouches in your digestive tract (diverticulitis) may cause peritonitis if one of the pouches ruptures, spilling intestinal waste into your abdominal cavity.
- Trauma. Injury or trauma may cause peritonitis by allowing bacteria or chemicals from other parts of your body to enter the peritoneum.

Peritonitis that develops without an abdominal rupture (spontaneous peritonitis) is usually a complication of liver disease, such as cirrhosis. Advanced cirrhosis causes a large amount of fluid buildup in your abdominal cavity (ascites). That fluid buildup is susceptible to bacterial infection.

Risk factors

Factors that increase your risk of peritonitis include:

- Peritoneal dialysis. Peritonitis is common among people undergoing peritoneal dialysis therapy.
- Other medical conditions. The following medical conditions increase your risk of developing peritonitis: cirrhosis, appendicitis, Crohn's disease, stomach ulcers, diverticulitis and pancreatitis.
- History of peritonitis. Once you've had peritonitis, your risk of developing it again is higher than it is for someone who has never had peritonitis.

Complications

Left untreated, peritonitis can extend beyond your peritoneum, where it may cause:

- · A bloodstream infection (bacteremia).
- An infection throughout your body (sepsis). Sepsis is a rapidly progressing, life-threatening condition that can cause shock and organ failure.

Prevention

Often, peritonitis associated with peritoneal dialysis is caused by germs around the catheter. If you're receiving peritoneal dialysis, take the following steps to prevent peritonitis:

- Wash your hands, including underneath your fingernails and between your fingers, before touching the catheter.
- Clean the skin around the catheter with an antiseptic every day.
- Store your supplies in a sanitary area.
- Wear a surgical mask during your dialysis fluid exchanges.
- If you have pets, don't sleep with them.
- Talk with your dialysis care team about proper care for your peritoneal dialysis catheter.

If you've had spontaneous peritonitis before or if you have peritoneal fluid buildup due to a medical condition such as cirrhosis, your doctor may prescribe antibiotics to prevent peritonitis. If you're taking a proton pump inhibitor, your doctor may ask you to stop taking it.

If you develop new abdominal pain or have a new injury

Peritonitis may result from a burst appendix or trauma-related abdominal injury.

- Seek immediate medical attention if you develop abdominal pain so severe that you're unable to sit still or find a comfortable position.
- Call 911 or emergency medical assistance if you have severe abdominal pain following an accident or injury.

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