

# ENCAPSULATING PERITONEAL SCLEROSIS (EPS): A SERIOUS COMPLICATION ASSOCIATED WITH PERITONEAL DIALYSIS.

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## INTRODUCTION

Peritoneal sclerosis is a rare and serious complication associated with peritoneal dialysis (PD), with difficult management, high morbidity and mortality.

**AIMS:** To analyze the incidence and outcomes of EPS in our series.

## METHODS

A retrospective analysis of all patients starting on PD from 1999 until 2015 in a single PD unit was carried out. A deep review of the records of cases with EPS was performed. Studied variables included demographic data, risk factors, method of diagnosis, specific treatment and outcomes.

## RESULTS

Of the 273 patients initiated on peritoneal dialysis during the study period 6 presented EPS (2.2%). Median age at PD onset 39 years (range 22 - 60). Three were females. EPS was diagnosed in 3 patients while they were on PD. In three cases EPS developed after transferring to another renal replacement therapy: 2 after kidney transplantation (KT) and 1 while on haemodialysis.

RISK FACTORS	N. PATIENTS
previous episode of peritonitis	3
haemoperitoneum	2
previous abdominal surgery	5
systemic lupus erythematosus	1
endometriosis	1
received tacrolimus for KT.	4

TREATMENT	N. PATIENTS
tamoxifen	5
steroids (1mg/Kg/day)	3
nutritional support	3
Surgery	0

Overall mortality was 50%.

In the two KT patients with EPS, tamoxifen was started and calcineurin inhibitors switched to m-tor. Both are alive and well nourished, having spent more than 36 months after diagnosis. Both maintain good graft function with serum creatinine around 1.1 – 1.3 mg/dl. They did not require surgical intervention for EPS.

## CONCLUSIONS

Peritoneal sclerosis is a rare and severe complication associated with peritoneal dialysis requiring high clinical suspicion to diagnose it in early stages. Development of EPS in patients with a functioning KT is not unusual. Establishing a timely treatment with a multidisciplinary team improves prognosis and patient survival.

