**Anatomy of Peritoneal Membrane and its Function**

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The peritoneum is the largest serous membrane in the body that covers the inner side of the abdominal wall and reflects over the abdominal viscera. Though the visceral peritoneum accounts for roughly four-fifth of the total surface area of the membrane, but the parietal peritoneum is the more important for peritoneal dialysis. Between the parietal and visceral layer of peritoneum there is potential space called peritoneal cavity, contain small amount of serous fluid. If dialysates remain more or less than normal in the peritoneal cavity that may cause edema or hypovolemic shock. Hence transport across the peritoneal membrane need great attention to the nephrologist during dialysis. Solute and water transport from blood to peritoneal cavity by diffusion and osmic ultra-filtration whereas absorption to the blood via lymphatic has negatively affect between these two process. Another important thing that the peritoneum is lined by mesothelium. Therefore, primary complication of peritoneal dialysis is infection due to the presence of a permanent tube in the abdominal cavity. Mortality is higher in the elderly and if present in prolonged time. Peritoneal sclerosis is a fetal complication due to growth of a thick layer of fibrin within the peritoneum, in where every chance of the bowel obstruction. The fluids contain glucose for dialysis use as a primary osmotic agent but this may lead to peritonitis. The decline of kidney and peritoneal membrane function and negative health outcome. It is important to be aware about the sex difference of peritoneal membrane during dialysis. Retrograded menstruation may occur in any women as there is continuity of peritoneal membrane with the fallopian tube. If goes undetected will cause bloody dialysate and create concern of the patients. Therefore, anatomy of peritoneal membrane and its function has great value during peritoneal dialysis and thereby effecting its therapeutic efficacy.