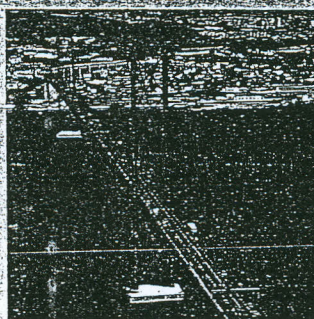
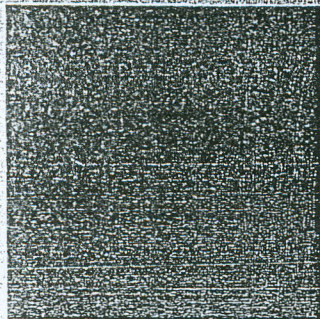


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ABSTRACTS OF THE
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Stenting during extracorporeal shockwave lithotripsy; is it necessary?

Mahmoud Mustafa, Hassan Abol-Enein.

Institutions: Osmaniye State Hospital, Urology Department, Osmaniye, Turkey, Urology and Nephrology Center, Mansoura University, Mansoura, Egypt

Keywords: Renal stone, ESWL, DJS.

Objectives: Prospective study to evaluate the place of double-J stent (DJS) in patients who undergo extracorporeal shockwave lithotripsy (ESWL) due renal stones with diameters less than 2.5 cm.

Material and methods: Thirty eight patients with mean age of 47.44 years (range 16-73) who underwent extracorporeal shock wave lithotripsy due to renal stone between November 2005-January 2007 were included. Twenty seven patients were stentless and eleven patients were stented. The average stone diameters in stentless and stended group were 1.54 cm and 1.72 cm respectively ($P > 0.05$). Double-J stent (DJS) was removed when there was no further passage of the fragments for 6 weeks after stone disintegration. All patients were given oral antibiotics and non-steroidal anti-inflammatory drug for one week after ESWL treatment. Stone passage and the data about DJS were determined with plain abdominal X-ray. The severity of lower urinary tract symptoms, loin pain and the need for intravenous or intramuscular analgesics were recorded.

Results: Two patients from stended group and one patient from stentless group were partially free of stone and the remaining patients became free of stone (92.11%). Steinstrasse were observed in two patients (5.26%); one patient from stentless group and another one after the removal of DJS. Only one patient from stended group had severe lower urinary tract symptoms which did not response neither to oral nor to other form of analgesics, thus DJS was extracted. The remaining patients were in no need for medication rather than the oral therapy.

Conclusion: Placement of DJS for the purpose of improving free stone rate or enhancing the passage of the fragments during ESWL is unnecessary in renal stone with diameters less than 2.5 cm. Therefore we suggest that the use of DJS should be limited to certain conditions like solitary kidneys and further prospective trial should be designed the criteria for stended ESWL.