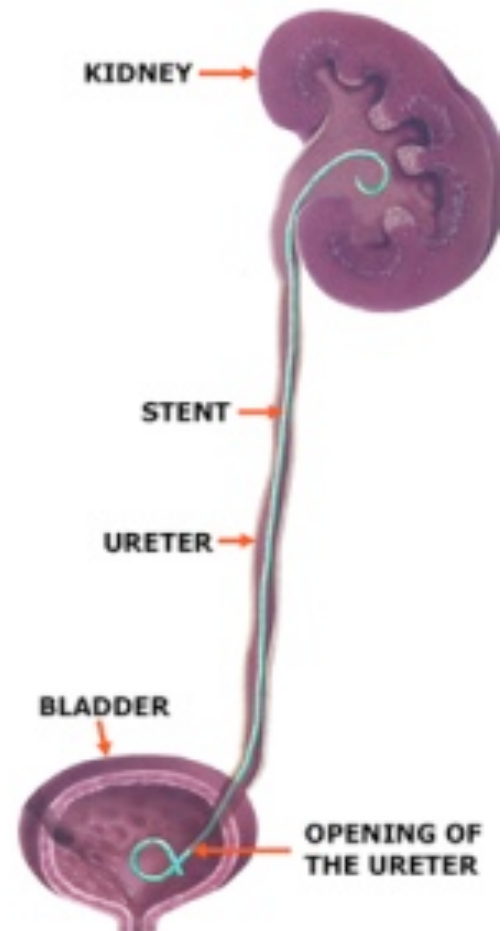


HAVING A URETERIC STENT

What is a ureteric stent?

A ureteric stent is a thin flexible plastic tube which is inserted into the ureter between the kidney and the bladder using a telescope under anaesthesia (see diagram). Stent insertion does not involve any cuts on the outside of the body. Ureteric stents vary in length between 22 to 30cm with a coiled end to prevent the stent migrating or falling out. The main purpose of the stent is to relieve or prevent ureteric obstruction before or after ureteric surgery.



Why do I need a stent?

The main purpose of a stent is to relieve obstruction. Obstruction is often caused by stones but can also be caused by blood clots, stricture (narrowing of the ureter due to scarring) or rarely tumours.

Stent insertion can either be done as an emergency (to relieve obstruction) or may be placed prior to treatment (such as lithotripsy or ureteroscopy). A stent may be also inserted after an operation such as ureteroscopy or pyeloplasty.

How long can the stent stay in the body?

Most stents are placed as a temporary measure. The amount of time the stent is left inside the body depends on the indication.

Usually when a stent is inserted prior to treating a kidney or ureteric stone, the stent is left in place until final treatment occurs, either with lithotripsy or surgery.

If you require a stent before an operation, the stent will stay in until the time of surgery, to allow the ureter to dilate. This makes the surgery more

straightforward. Following the surgery you may still need a stent for a number of weeks, to prevent oedema (swelling) of the ureter.

If you require a stent for obstruction secondary to a stricture or compression of the ureter by other organs, the stent will need to remain in place until the primary cause is treated or relieved. However it is possible in some cases to require stents for life. In this situation the stent may need changing every six months. There may be a place for using a special kind of stent that can stay in the body for longer periods, such as a metallic stent.

Following the insertion of a stent, your consultant or a member of his team will discuss any further treatment plans with you.

How is your stent removed?

Stent removal is a short procedure that can be performed under local anaesthesia in an outpatient setting using a flexible telescope. Occasionally, if the stent is only required for a few days, there will be a thread attached to the lower end of the stent that comes out through the urethra. The stent can be removed by the doctor by just pulling the thread out.

Stent symptoms

Ureteric stents are designed to relieve obstruction and allow the patient to lead as normal a life as possible. However, there are some symptoms and risks associated with stents. The side effects, although not serious, can be a nuisance. The common symptoms of stents are:

1: Increased frequency of passing urine.

This is a common problem especially immediately after the stent insertion. This is due to the lower end of the stent causing irritation to the bladder producing a sensation of needing to pass urine frequently.

2: Presence of blood in the urine.

This is a common side effect especially during physical activities and dehydration. This is also due to stent irritation. The best way to prevent irritation and bleeding is to drink plenty of fluid, aiming for two or more litres a day. A high fluid intake will wash out any blood or clots and can also reduce the irritation.

3: Discomfort and pain.

It is possible to feel some pain in the back on the side of the stent especially, when passing urine, as some of the urine can reflux back into the kidney. Again the pain may be felt more often after physical activity. For most patients the symptoms are minor and can be tolerated.

4: Infection.

The stent increases the risk of urine infection, as it is a foreign body in the urinary system. The symptoms of an infection would include; feeling unwell with fever, a burning sensation during the passing of urine, experiencing bladder and kidney pain with fever. If you develop any of these symptoms, please see your GP to have a urine culture taken and receive appropriate antibiotics.

5: Rare complications.

Rare complications include urinary incontinence in women, which is due to the lower end of the stent descending beyond the urinary sphincter. The incontinence will resolve once the stent is removed or repositioned. Another rare complication is stent migration and displacement. If this occurs, the stent will probably be removed and a new stent reinserted.

The stent can become encrusted with calcium. This is a very rare complication and a potentially serious one. Stent encrustation may require further surgery to remove the stent under general anaesthesia. Therefore it is very important to change the stent regularly and not leave in a stent too long. If you do not hear from the urology consultant within the expected time-frame you must to contact your urologist and inform them that you are due a stent change.

What do I do if I have severe symptoms?

Most stent symptoms are minor and can be tolerated however for a few patients they can cause severe discomfort and irritation of the bladder. Stent symptoms can interfere with daily activity and affect lifestyle quality. There are some tablets that can help with stent symptoms such as alpha-blockers or anticholinergics. If the stent is removed prematurely the obstruction can re-occur and another emergency procedure may be required to re-insert the stent.

An alternative choice to a stent is the insertion of a nephrostomy tube, which is a tube to drain the kidney out directly through the skin to the outside of the body. This is a temporary tube inserted under local anaesthesia in the radiology department. The nephrostomy tube collects urine into a bag.

Travel and holidays

Once you have a stent in place it is usually safe to travel. The stent will protect your kidney from obstruction, even if the primary cause has not yet been dealt with. You may experience discomfort, especially during physical activity and this could make the holiday less enjoyable. You will need to discuss any travel arrangements with your insurance company before you go.

Does the stent interfere with sex?

In general there is no restriction to your sex life by the presence of a stent although a few patients may experience some discomfort during sexual activity.

What do I need before being discharged from the hospital?

Once the stent is in place, your urologist or a member of the team will discuss any further planned treatment with you. Please make sure you have enough painkillers to take home with you. Drink plenty of fluid and have a copy of your discharge summary, especially if you are travelling.

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