



Retrograde ureteric stenting

Information for patients from the Urology Department

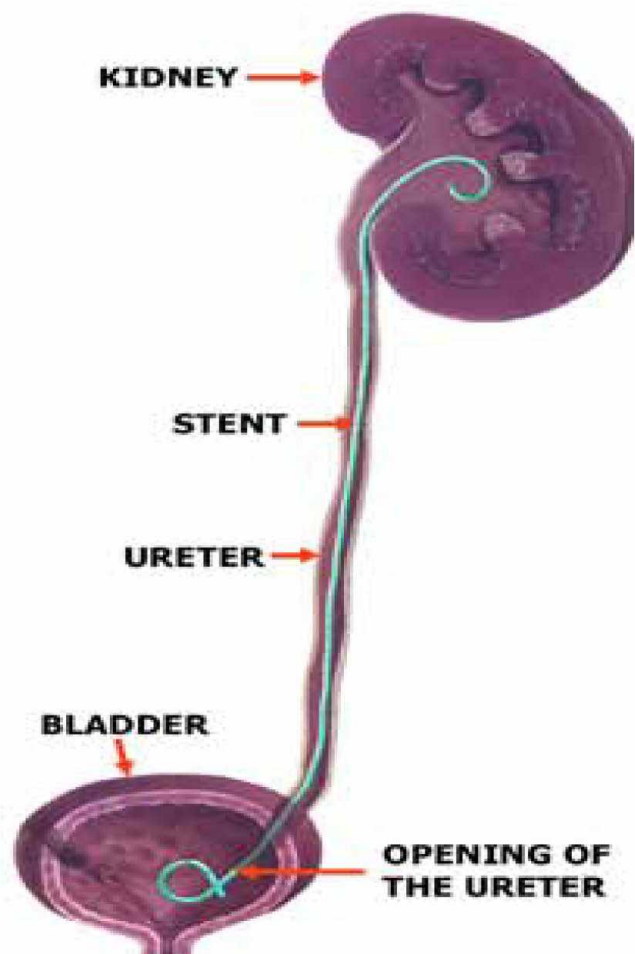
This leaflet is not meant to replace the information discussed between you and your doctor, but can act as a starting point for such a discussion or as a useful reminder of the key points.

What is a ureteric stent?

Urine is produced by your kidneys. From there it drains through a narrow tube (the ureter) into your bladder.

A ureteric stent is a thin plastic tube placed in your ureter to allow urine to drain freely from your kidney to your bladder.

The average length of a stent placed in adults is 24 to 30cm long.



A ureteric stent allowing urine to flow from the kidney to the bladder

Why do I need a ureteric stent?

A ureteric stent is for patients who have either an obstruction to their flow of urine from their kidney to their bladder, or for patients where an obstruction is very likely to happen.

Obstruction may be caused by a kidney stone, a piece of stone after shock wave treatment to a stone, a narrowing (stricture) along the ureter due to scarring / growth, or even due to an enlarged prostate. Your doctor will explain more about the reasons for your stent at the time of your consultation.

Obstruction in your ureter leads to unwanted pressure build-up in your kidneys. This affects the way your kidneys work and may cause permanent kidney damage. Obstructing the flow of urine also makes you more likely to get an infection which can lead to kidney damage. So it is important that any evidence suggesting you have a kidney obstruction is dealt with quickly.

Will I have to stay in hospital?

You do not need to stay in hospital, unless the reason for the stent insertion needs you to. If you do need to stay, the reason for this will be explained to you.

Are there any alternatives?

Other options include a tube lying outside the body, or more complex surgery to unblock the kidney. These options will be discussed with you by your doctor if they are appropriate for you.

How long is the stent left inside?

Ureteric stents are usually placed temporarily to allow free drainage of urine through the stent from your kidney to your bladder. Stents can be left in for a couple of days, weeks, or even months during which time the original cause of the obstruction will be dealt with.

If you need to have a stent for longer than a few months, you will be asked by your doctor to come in for a stent change. If this happens, the old stent will be taken out and a new one put in.

The overall time a stent stays inside depends on individual conditions. This will be discussed with you in detail by your doctor.

How is a retrograde ureteric stent put in?

This procedure is usually performed under general anaesthesia (you will be asleep).

A special telescope (cystoscope) is passed through your water passage (urethra) into your bladder, where the openings of your ureter can be seen. With the help of x-rays the stent is then passed up over a guide wire through your ureter until it lodges in your kidney. Once the guide wire is removed, both ends of the stent coil, preventing it from becoming displaced.

Will I feel the stent inside me?

The stent is flexible and adjusts to the movement of your body. They are designed for you to lead as normal a life as possible. However, while some people are able to tolerate them very well others suffer from what we call 'stent symptoms' and are aware of the stent at most times (see below for more information).

What are stent symptoms?

In most cases stent symptoms are tolerable. In extreme cases the symptoms are intolerable and the stent may have to be removed.

Most symptoms are caused by the stent irritating its surrounding area. It may feel like a 'foreign' material that your body is trying to squeeze out along with the urine.

Symptoms include the following.

- Bloodstained urine; this improves by drinking plenty of water.
- Feeling the need to pass urine very frequently but often with only small amounts of urine passed.
- Feeling the need to get to the toilet urgently.
- Dull pain / ache / discomfort along your back, in your groin, or even in your genitalia on the side of the stent.
- Incontinence, but this is rare.

Most of these symptoms improve and settle with time. You should drink plenty of water and take painkillers (such as paracetamol) if necessary.

If your symptoms get worse, you develop a fever, or you are at all concerned, please speak to your doctor as soon as possible.

Are there any complications to having a stent?

Ureteric stenting is a very safe procedure but there are complications that can arise.

- The nature of the obstruction may mean that your surgeon is unable to place the stent satisfactorily inside your ureter. Should this happen your doctor will discuss with you other methods of relieving your obstruction.
- Occasionally, when the stent has been in place for a while, there is a possibility that hard debris may deposit on its surface. This makes the stent stiff and its removal more difficult, which can lead to the use of lasers or shock waves to break up the crystals. For this reason it is important that you drink two to three litres of fluids each day and make sure that you have a date for the removal / change of your stent.
- You may develop a fever or burning sensation when passing urine, suggesting you have developed an infection. This is easily treated with a course of antibiotics but it is important that you contact your doctor as soon as you start to feel unwell.

What precautions should I take with daily activities, work, and sports?

Other than the things already mentioned above, your stent should not stop your day to day activities. You can carry on with work and sport as normal so long as your underlying kidney condition and your general health allow you to do so.

However, if your work / sport involves strenuous physical activity you may feel some discomfort and notice that your urine has become bloodstained. This should settle by itself.

Can I travel?

It is possible to travel with a stent so long as your general health allows it. If you are planning a holiday be aware that you may need to ask for medical help at some point.

For further information

If you have any further queries, please speak to your doctor or consultant.

Useful contact numbers

If you have any questions or concerns about your stent, please telephone the Kent and Canterbury Hospital switchboard on 01227 766877 and ask to speak to your consultant's secretary.

Your follow-up:

My consultant: _____

Date of stent placement: _____ [] right [] left

Stent change/removal: _____ weeks / months

Date: _____

Location: Kent and Canterbury Hospital, Canterbury

This leaflet has been produced with and for patients.

Please let us know:

- If you have any accessibility needs; this includes needing a hearing loop or wanting someone to come with you to your appointment.
- If you need an interpreter.
- If you need this information in another format (such as Braille, audio, large print or Easy Read).

You can let us know this by:

- Visiting the Trust web site (<https://www.ekhuft.nhs.uk/ais>).
- Calling the number at the top of your appointment letter.
- Adding this information to the Patient Portal (<https://pp.ekhuft.nhs.uk/login>).
- Telling a member of staff at your next appointment.

Any complaints, comments, concerns or compliments, please speak to a member of your healthcare team. Or contact the Patient Advice and Liaison Service on 01227 783145 or email (ekh-tr.pals@nhs.net).

Patients should not bring large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property has been handed into Trust staff for safe-keeping.

Further patient information leaflets are available via the East Kent Hospitals' web site (<https://www.ekhuft.nhs.uk/patient-information>).

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