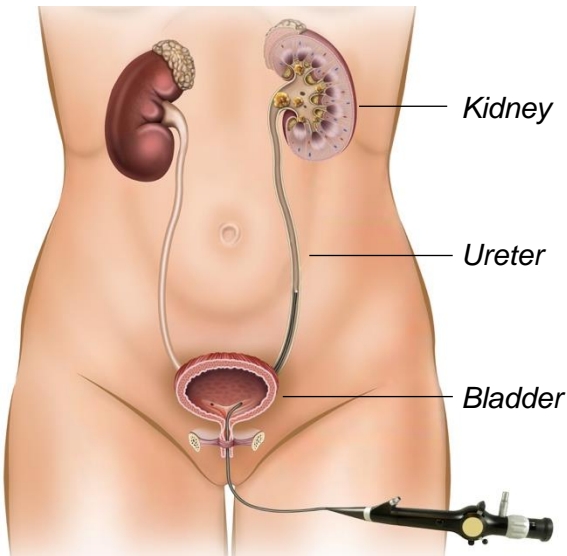
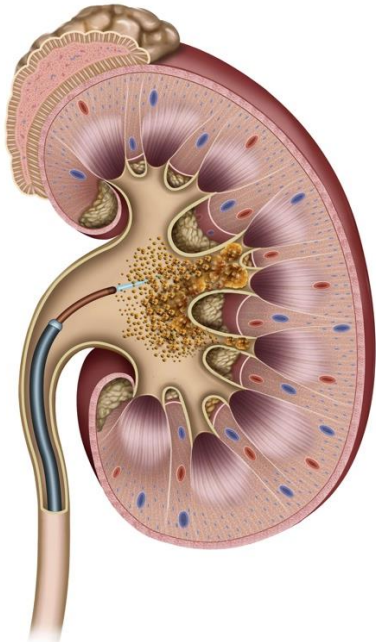


Ureteroscopy

Procedure information



A ureteroscope is passed through the urethra and bladder, into the ureter.



A kidney stone is broken up into small fragments with a laser during ureteroscopy.

What is a ureteroscopy?

A ureteroscopy is a procedure to look inside the ureter and the kidney, by passing a small telescope (a ureteroscope) through the urethra (waterpipe).

Why is ureteroscopy required?

Ureteroscopy is performed to investigate and treat problems with your kidney and ureter, including:

- To remove kidney stones from the kidney or ureter.
- To investigate a blockage in the ureter.
- To investigate bleeding from the kidney or ureter.
- To investigate and/or biopsy a mass in the kidney or ureter.

What does ureteroscopy involve?

Ureteroscopy is performed under general anaesthetic (completely asleep).

We pass a small telescope through the urethra (waterpipe) and bladder, into the ureter.

If we find a kidney stone, the stone can be broken up into small fragments with a laser (pictured). Any remaining fragments can be removed by grabbing them with a basket.

If we find a blockage, a mass, or a cause for bleeding, we can take a biopsy and/or cauterise the area of concern.

A ureteric stent may be inserted at the end of the procedure. This is a long, thin hollow plastic tube which runs from the kidney, through the ureter, into the bladder (pictured on next page). It allows urine to drain from the kidney to the bladder after the procedure.

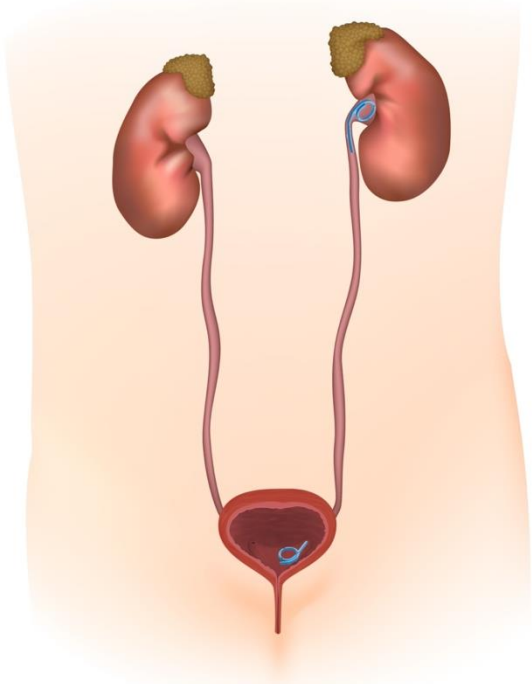
A catheter (tube through the urethra into the bladder to drain urine) may be placed at the end of the procedure.

What is the recovery after ureteroscopy?

You will usually need to stay in the hospital for one night after the procedure, although sometimes the procedure is performed as a day surgery.

If you have a catheter it will usually be removed on the first day after the procedure.

If you have a ureteric stent inserted at the time of the ureteroscopy, it usually needs to be removed a few days to weeks after the procedure. Usually, the stent is removed by cystoscopy (look into the bladder with a telescope). Sometimes the stent is attached to a fine string coming out of the urethra and is removed by pulling on the string.



A ureteric stent in the left ureter

You can usually drive one to two days after the procedure.

You can usually return to work two to four days after the procedure.

What are the risks of ureteroscopy?

Common risks (1/2 – 1/10)

- Symptoms from having a ureteric stent including mild pain in the side, bleeding in the urine, urinary frequency and burning when passing urine.

Occasional risks (1/10 – 1/50)

- Urine infection requiring antibiotics or further treatment. Sometimes infection can spread to the kidneys, testes, or blood stream (sepsis).
- Inability to pass urine after the procedure, requiring placement of a catheter.
- Pain in the side after the procedure.
- Damage to the urethra resulting in scarring (urethral stricture).
- If you are having treatment for a kidney stone:
 - Sometimes small fragments of stone may remain after the procedure.
 - Sometimes it is not possible to remove the stone and a second procedure is necessary.

Rare risks (1/50 – 1/250)

- Significant bleeding in the urine, requiring another procedure to correct.

Very rare risks (<1/250)

- Damage to the ureter (tube from the kidney to the bladder) resulting in scarring (ureteric stricture) and blockage of the kidney.
- Very, very rarely, major damage to the ureter or kidney requiring another procedure to correct, or removal of the kidney.

The risks of anaesthesia have not been listed here.

What are the alternatives to ureteroscopy?

Alternative treatment options for kidney stones include:

- Surveillance – for stones in the kidney not causing any symptoms.
- Conservative management – for stones in the ureter, giving the stone time to pass on its own.
- Medications to dissolve the stone – not all types of stones can be dissolved.
- Extracorporeal shockwave lithotripsy (ESWL).
- Percutaneous nephrolithotomy (PCNL).

Alternative options to investigate a blockage, a mass in the kidney or ureter, or bleeding include:

- A CT or MRI scan.
- Urine tests looking for abnormal cells.
- A cystoscopy and retrograde pyelogram (instilling dye into the kidney and ureter).

These investigations don't provide as much information as a ureteroscopy.

Speak with your urologist or see www.brisbaneurologyclinic.com.au for information regarding these alternative treatment options.

For more information please visit www.brisbaneurologyclinic.com.au.

This is general information only. Please consult your doctor for more information and treatment options.

For appointments and enquiries please contact 07 3830 3300.