

Kidney Stone

What is a kidney stone?

These stones form from minerals in your urine for various reasons, some of which are preventable.

They can vary in size from 1-2 mm to bigger than 8-10 mm. As a rule of thumb the bigger the stone is, the less likely it will pass without problems. Most stones are small and are flushed out in the urine.

Larger stones can become lodged at any point in the urinary tract and it is when they get stuck that they cause pain. Men are more likely to get stones than women and they can continue to occur throughout life.

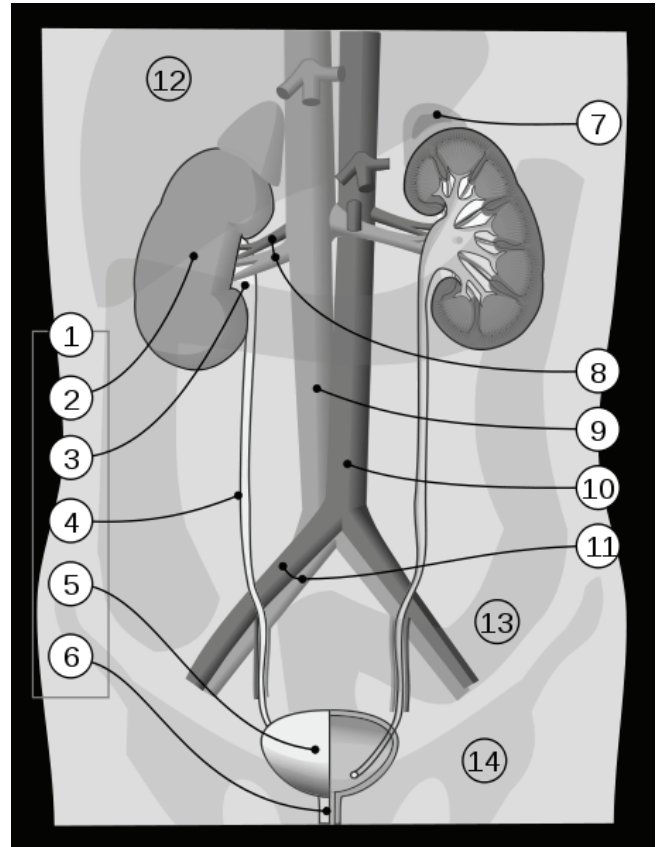
What happens with a stone?

The stones themselves are not a problem until they get lodged in your urinary tract, somewhere from your kidney to your bladder. Once in your bladder they are usually not a problem.

Severe pain typically starts in your lower back one side or the other, comes in waves and goes round to your groin and genitals at times.

Why did you get one?

Often no particular cause is identified but stones do form more readily when your urine is concentrated. This is usually when you don't drink enough water. Some dietary habits are associated with stone formation such as very large amounts of leafy vegetables (more than would be considered normal). Some infections of the urine have been associated with stones .



Jordi March iNogue, 2010, Urinary System, 25.05.2012 <http://en.wikipedia.org/wiki/File:Urinary_system.svg>

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| 1. Urinary tract
(Human urinary system) | 8. Renal artery and vein |
| 2. Kidney | 9. Inferior vena cava |
| 3. Renal Pelvis | 10. Abdominal aorta |
| 4. Ureter | 11. Common iliac artery and vein |
| 5. Urinary bladder | 12. Liver |
| 6. Urethra | 13. Large intestine |
| 7. Adrenal Gland | 14. Pelvis |

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Initial treatment

You may have been given strong pain killers through a drip or as a tablet. Do not drive after this medication.

Pain management usually involves a strategy to get the best effect for the least side effects so follow the instructions you have been given.

Your pain may be gone because the stone has passed but even when the stone stays lodged in one spot the pain will often settle.

You may have been given anti-nausea medications and fluids through a drip if you were dehydrated. Some medications used for pain are given in the rectum as suppositories.

Urine and blood tests are done to check for infection (which can be very serious) and kidney function which stays normal for a long time even with blockage.

X-rays, CT scans and ultrasound scans are done in the Emergency Department or as an outpatient, depending on circumstances.

Admission is not usually required and will only occur if you are very unwell, have uncontrolled pain or have or are at risk of kidney failure.

Follow Up

You will be sent home with a plan to be reviewed at the outset by your GP and then by a Urologist if necessary.

Some stones, if not passed, can be managed without surgery but some require removal or breaking up treatment by your Urologist.

Continue to take your pain killers as prescribed and see your GP if you are having ongoing problems.

Prevention strategies

Depending on the type of stone there may be some specific dietary prevention strategies or treatment but in general keeping adequately hydrated by drinking enough water to keep your urine clear and not yellow is sufficient. Drinking large amounts of water routinely can drain your body of salts and cause you problems.

Instructions:

Seeking help:



In a medical emergency go to your nearest emergency department or call 000.

