TEXAS UROLOGY

KIDNEY STONES

Kidney stones vary in size from the head of a pin to the size of a golf ball. They are irregular in shape with burr-like projections coming out at different angles. The pain produced by a kidney stone can be excruciating.

There are a number of different types of kidney stones: calcium, uric acid, ammonium, and others. 85% of kidney stones are composed of calcium.

Each type of stone is associated with different underlying medical problems. There are many tests that can be performed to determine the cause, and if other stones are present. Stones are much more common in men than women, and vary from location to location within the United States. Statistics have shown that a patient who has their first calcium stone is at no greater risk for a second one. However, once a patient has had two stones, the chance of another stone increases and continues to do so with each succeeding stone.

It is unusual for a stone in the kidney to produce pain. When the stone drops into the tube that carries the urine from the kidney to the bladder, the pain can begin. The pain is from the swelling of the tube, the blockage of the flow of urine, or the attempt to expel the stone into the bladder.

Once the diagnosis of a stone has been raised, a patient will have X-rays (IVP). The X-ray is done to determine the exact site and size of the stone, amount of blockage to the kidney, and if other stones are present.

No aspect of medicine has changed as dramatically over the years as that of the treatment of kidney stones. The optimal treatment for kidney stones, however, is still time. The vast majority of stones will pass spontaneously given sufficient time.

There are a number of different treatment options available:

1. ESWL (ExtraCorporeal Shockwave Lithotripsy), a treatment option which involves the passage of sound waves into the body. The waves fragment the stone into fine particles which then can be passed.
2. Urteroscopy, which involves the passage of a long, thin telescope up to the area of the stone. The stone may then be fragmented with a laser, ultrasonic probe, or visually extracted.
3. Indirect manipulation and extraction of the stone via wires and baskets.

Patients frequently ask whether their stone can be dissolved. Only uric acid stones have been found to be dissolvable with medication. The passage of stones can be increased by forcing fluids and increasing activity. Stones can be prevented by increased amounts of fluid intake, and reduction in dietary calcium.

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