CYSTOSCOPY + INSERTION/ REMOVAL OF STENT

Providing Specialist Care in South Australia & Northern Territory
What is a Ureteric Stent?

A ureteric stent is a specially designed hollow tube, made of a flexible plastic material that is placed in the ureter. The length of the stents used in adult patients varies between 24cm-30cm.

The stent are designed to stay in the urinary system by having both ends coiled. The top end coils in the kidney and the lower end coils inside the bladder to prevent its displacement. The stents are flexible enough to withstand various body movement.

A stent can help to relieve pain e.g. from a stone, drain infection or help with kidney function if the kidney is obstructed. A stent is placed in the kidney in order to prevent or temporarily relieve an obstruction.

What is a Cystoscopy and Stent Insertion?

A stent is placed during a cystoscopy and could be inserted as an additional part of an operation on the ureter and kidney (e.g. Ureteroscopy). Occasionally they are placed from the kidney down to the bladder using special x-ray techniques.

Preparation for your procedure:

A stent can be removed either with the help of sedation or anaesthesia or in many cases with flexible cystoscopy and local anaesthetic lubricant. Sometimes a stent can be left with a thread attached to its lower end that stays outside the body through the urethra. Doctors can remove such stents by just pulling this thread.

If there is no thread in place, the doctor will use the flexible cystoscope to view the stent and then use the graspers to pull the stent out.

Local Anaesthetic:

This is a short procedure to remove the stent using a flexible cystoscope. No preparation is required. Please continue to take all your usual medications. You do not need to fast, if no anaesthesia is used. There is no restriction on driving after this procedure, if no anaesthesia is used.
Preparation for your procedure cont;

**Sedation/General Anaesthetic:** You will be given instructions regarding medication and fasting.

We will provide you with instructions regarding all aspects of preparing for your operation.

- Pre-operative blood and urine tests.
- Details of admission to hospital.
- Information regarding fasting and medications

**What to expect afterwards:**

In the majority of patients, the stents are required for only a short duration. This may be just a few days. However, a stent can stay in for up to three months without the need to replace it. When the underlying problem is not a kidney stone, the stent can stay even longer. There are special stents, which may be left in for a much longer time. Your Urologist will tell you how long the stent is expected to remain in place.

The stent is not expected to cause much disruption to your normal daily life. However, you may experience some side effects that can cause some problems, either directly or indirectly.

Stents can cause discomfort or pain, commonly in the bladder and kidney (loin) area, but sometimes in other areas such as the groin, urethra and genitals. The discomfort or pain may be more noticeable after physical activities and after passing urine. Bending from the abdomen is often worse.

There also might be an increase in frequency of passing urine, the need to rush to pass urine (urgency). There also might be a small amount of blood in the urine. This is quite common and the situation can improve with a greater fluid intake. Insertion of a stent can also result in a sensation of incomplete emptying of the bladder. If you develop a temperature/vomiting/sharp pain, please contact our rooms.

If any of these symptoms are particularly bothersome you can contact our office to discuss them further. A urine test (to eliminate an infection) may be ordered.

**Complications:**

- The chance of an infection is <5%.
- Significant bleeding is extremely unlikely as is a blood transfusion.
- An injury to the ureter is a risk, however, a very small one of <1%.
- This is generally a very safe procedure.
After Discharge from Hospital:

You should try to drink about 2L of fluids, mainly water a day. This will help to cut down the risk of getting an infection and will reduce the amount of blood in the urine. You can take some pain relief (Panadol and nurofen) on a regular basis. You may want to try some Ural sachets (you can get these from the chemist) 2-3 per day if needed.

Driving:

**You should not drive for 24 hours after having sedation/ anaesthetic** (or as instructed by your Urologist).

Patients who are travelling outside the metropolitan area are required to check when they are able to travel, and will be required to stay in the metropolitan area for 24 hours (or as instructed by your Urologist).

Emergency Contacts:

If you require emergency care after hours please present to your nearest accident and emergency department.

**Adelaide Walk-in Emergency Clinic** (8464 0643).
Located at The Tennyson Centre
520 South Road, Kurralta Park SA 5037.
Emergency Clinic is open 7 days a week—9.00am - 9.00pm.

**Ashford Hospital** (8375 5205).
55 Anzac Highway, Ashford SA 5035.
Emergency Department is open until 10.00pm.

**Wakefield Hospital** (8405 3440).
300 Wakefield Street, Adelaide SA 5000.
Emergency Department is open 24 hours/day.

**For patient’s outside the Metropolitan area, please present to your nearest hospital emergency department.**

Follow up:

A follow up appointment will be planned by your Urologist as required.

If you have any concerns after your procedure, then please contact our office and speak to one of our practice nurses.

The content provided within this document is intended as a guide only and does not apply to all patients. Additional information, including patient specific potential risks, must be obtained during consultation with your Urologist.