

Ureteric stents

Ureteric stents are thin hollow mostly polyurethane tubes about 25 cm long that are placed inside the ureter between the kidney and bladder and held in place by pigtail type coils at each end. They are placed to overcome ureteric obstruction and promote urine drainage to the bladder. These are commonly used after stone surgery when there will be some bruising and swelling in the ureter and often small stone fragments. Sometimes ureteric stents are placed prior to ureteric stone surgery to dilate a tight ureter and allow subsequent instrumentation. Most stents are left for 3 – 7 days but on some occasions longer-term stents are needed. Polyurethane ureteric stents left long term usually need to be changed every 6 months. Metallic ureteric stents can be left for a year or two.

Ureteric stents are placed under a general anaesthetic and typically left after stone surgery. When ureteric stents are to be left for no more than a week, they are usually placed with a thin thread attached to the bladder end of the stent that protrudes from the urethra about 10 cm. It is important to be careful of this thread when undressing or showering to prevent accidental removal.

Unfortunately, ureteric stents are often quite irritating. The bottom coil in the bladder gives the feeling of needing to pass urine frequently and movement of the stent while voiding often causes some discomfort in the back over the kidney. There is usually some blood in the urine from the previous surgical procedure rather than the stent and this can persist for a week or two.

Ureteric stent removal is easily and painlessly achieved by simply pulling the thread in the direction of the urethra (forwards and downwards). This is best performed while sitting (females) or standing (males) at the toilet because of a little urine dribbling from the end of the stent during the process. When stents are left for more than a week or mostly when bilateral (both sides), they are removed at flexible cystoscopy. This minor procedure performed in hospital almost painlessly without anaesthetic. A small flexible cystoscope (telescope) is passed into the bladder; the end of the stent is grasped with forceps and removed. Irritative symptoms from the stent usually resolve as soon as the stent is removed but occasionally pain can be experienced after stent removal if there is some residual obstruction. If simple analgesics are insufficient, readmission to hospital may be required. If necessary, please contact the rooms on 8267 2200 or after hours 0418 829207.

