

# Having a ureteric stent

What to expect and  
how to manage at home

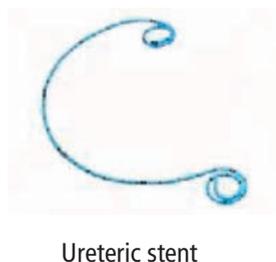
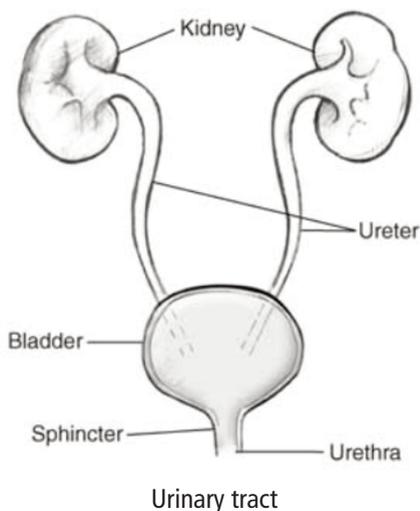


## Why do I need a ureteric stent?

In patients who have, or might have an obstruction of the kidney, a stent allows the kidney to drain. Without the stent your kidney would become enlarged and in some cases could stop working altogether.

Common causes for obstruction of the kidneys and ureters (the tubes from your kidney to your bladder) are:

- a kidney stone or part of it moving into the ureter
- a stricture (narrowing) of the ureter
- following an operation or after an instrument has been inserted into the ureter or kidney (obstruction is usually temporary)
- a tumour of the kidney, bladder, cervix or prostate.



## What is a ureteric stent?

This is a fine plastic hollow tube placed in the ureter. It allows drainage of urine from the kidney to the bladder.

A stent is designed to stay in the urinary system by having both of its ends coiled. The top end coils in the kidney and the bottom end coils into the bladder to prevent its displacement. Stents are flexible to allow body movement.

## **How is the stent put in place?**

Usually a stent is put in place under a general anaesthetic using a small telescope (cystoscope), which is passed through your urethra (water pipe) into your bladder. The stents are then placed in your ureter and kidney through the opening of the ureter in your bladder.

## **How long will the stent stay in for?**

The urologist (specialist doctor) will discuss the expected duration of the stent in your body. This depends on the purpose of the stent and will vary between individual patients.

Most stents are designed to be temporary, to be removed within a month. Some people require stents indefinitely, in which case the urology team will arrange for regular changes of the stent once or twice a year.

The maximum time a stent should be left in the body is a year. If you have a stent that has been placed over a year ago please contact the urology department.

## **How is the stent removed?**

This is usually carried out in the urology clinic using a small flexible telescope passed into the bladder. It is usually done under a local anaesthetic.

## **Are there any alternatives to a stent?**

The alternative is a 'nephrostomy tube' (a tube placed directly through the skin into the kidney to relieve obstruction). However this involves carrying a urine collection bag attached to your back and is therefore rarely a long term solution.

## **Living with a ureteric stent**

A ureteric stent is designed to allow people to lead as normal a life as possible. However they are not without side effects. Most of these side effects are not a danger to your health or your kidneys but they can become a nuisance.

## What are the possible side effects?

Most patients with a stent in place are aware of its presence most of the time. Stents can cause urinary symptoms, such as:

- an increased need to pass urine (frequency)
- a need to rush to the toilet (urgency)
- some blood in the urine (haematuria) – this is quite common and can be improved with increased fluid intake
- you may also have the feeling of not emptying your bladder completely – this is due to stent irritation.

Some stents can cause discomfort or pain in the bladder or kidney area, which may be more noticeable after activity or passing urine. You may need to take pain killers if pain persists. A tablet called tamsulosin can also improve these symptoms.

## How else will a stent affect my life?

- **Work** – you can continue to work normally. If your job involves a lot of physical activity then you may experience some discomfort.
- **Social life** – this should not be affected in a significant way. You may have an increase in frequency and urgency, so you may need to use public toilets more frequently.
- **Travel** – you can travel with a stent in place provided you feel well enough to do so. You may need to alter your travel insurance to ensure full cover whilst away.
- **Driving** – you can drive as normal provided you feel well enough to do so. You will need to check with your car insurance with regards to how soon you can drive after your operation following a general anaesthetic – this is usually around 24-48 hours.
- **Sex** – there are no restrictions on your sex life due to the presence of a stent. Few patients experience discomfort during intercourse. Occasionally the stent may have an effect on sexual desire.

## **Can the stent become dislodged or fall out?**

Stents can very rarely fall out but may become displaced, and this usually means slipping down slightly into the bladder. If this happens or you are worried, discuss with your GP or contact your urology department.

## **What should I look out for?**

You are at a more increased risk of urinary tract infection with the presence of a stent and your underlying kidney problem. Some symptoms to be aware of are:

- burning when passing urine
- raised temperature
- increased pain or discomfort.

This will usually require a visit to your GP for a urine test, and a course of antibiotics if appropriate.

## **How can I help myself?**

Drink at least 1.5-2 litres of fluid (mainly water) a day. This will help reduce the risk of infection. It will also help if there is any blood in the urine.

## **When should I seek help?**

Contact a doctor or the hospital if:

- you experience a constant and unbearable pain associated with the stent
- you have symptoms of urinary tract infection as mentioned above
- the stent becomes dislodged or falls out
- there is significant change in the amount of blood in your urine.

## **Contact us**

To contact the urology team at hospital, either phone the urology clinic on 01872 252220 or your consultant's secretary via switchboard.

If you would like this leaflet in large print, braille, audio version or in another language, please contact the General Office on 01872 252690

