

## Department of Urology

### Patient Information Sheet

#### Ureteric Stent

This is a fine, soft plastic tube which is inserted into the ureter (the tube that connects the bladder to the kidney) and encourages urine to drain

This information sheet was developed and agreed by our Urology Team. Information within this sheet was obtained from various sources including; the Urology Team, the British Association of Urological Surgeons, other NHS Trusts and Department of Health Websites.

#### Why are stents inserted?

To enable urine to drain freely from the kidney into the bladder. There are numerous reasons why stents are inserted, such as:

- stones or fragments of, in the ureter
- narrowing (stricture) of the ureter
- swelling of the ureter following a procedure or operation
- growths or other abnormalities in the ureter
- blockage (obstruction) where the ureter enters the bladder from bladder disease, enlargement of prostate or other causes

#### What are the alternatives to this procedure?

Observation, nephrostomy (tube inserted through the back directly into the kidney).

#### What are the most frequently occurring after-effects or serious risks of this procedure?

##### Common

- Mild burning or bleeding on passing urine for a short period after insertion
- A further procedure to remove or replace stent
- Increased desire to urinate (urgency) and increase in frequency of urination.

##### Occasional

- Urinary infection requiring antibiotics
- Discomfort or pain from stent irritation in the bladder or kidney area (loin). This may be more noticeable after urination or physical activity.
- Men can experience an uncomfortable sensation at the tip of the penis when urinating and women may experience symptoms of cystitis.

##### Rare

- Blockage of the stent requiring further treatment
- Severe infection requiring intravenous antibiotics

### **How are stents inserted?**

Usually under a general anaesthetic. Your Consultant or Specialist Nurse will be able to give you further information on this procedure and a specific information sheet.

### **What happens after the procedure?**

You will pass some slightly bloodstained urine at first and this may sting slightly. Over the next 24 hours, try to drink plenty of non-alcoholic fluids, to flush your system and reduce these after effects (we suggest 2-3 litres or 3-6pints).

You may also have a further x-ray taken before leaving hospital, to check the position of the stent.

If you experience discomfort you will be given some pain killing tablets to take home with you. Once at home, you should ask your GP for further supplies if you feel you need them.

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

If you develop a fever, increased bleeding or pain on urination you should contact your GP.

### **Further Appointments or Treatments**

If your stent is to be removed at a later date (usually 2-6 weeks later, depending on the treatment you have had or require), you will be sent an appointment to come to the Day Surgery Unit. The stent is removed under local anaesthetic, using a narrow telescope up the urethra (water pipe) into the bladder. The end of the stent, visible in the bladder, is grasped and the stent removed.

If you require other treatments or procedures (such as shock wave treatment to stones) you will be given this information before you leave hospital.

If for any reason you do not receive an appointment for removal or change of stent at the appropriate time, it is **ESSENTIAL** that you contact us (see numbers below).

### **Who should I contact for more information?**

- **The Specialist Urology Nurses:**

Sue Sill & Chris Backhouse  
020 8934 3547

Yvonne Haffenden, Lin Williams & Suzy Waight  
Urodynamics - 020 8934 3038

- **The Urology Ward – Alexandra 020 8934 3152**

- If you have a cancer condition and would like further information regarding this, please contact

Olga Champ – 020 8934 2729

- Your Urology Consultant.