Percutaneous nephrolithotripsy is an acknowledged treatment for large kidney stones. Many urologists have continuously sought to increase its acceptance especially in Europe. Diminishing tract size allows an easier management from the anesthetists’ point of view and may reduce patient morbidity.

However, there is still no consensus concerning the indications of tubeless PCNL versus early removal of a small nephrostomy. Some authors demonstrated equivalent results with removal of the nephrostomy on the first postoperative day; in addition double j stent related complications in the tubeless group may occur in 19% of patients16-18. Many urologists performing tubeless PCNL feel safer with the application of a hemostatic sealant. Some studies report increased early postoperative hemoturia when not using a glue19-20. Others demonstrate an advantage with the glue regarding postoperative pain and hospital stay21. However, glues are expensive and their use raised concerns for a possible lithogenic effect. Hemostatic gelatin matrix was said to be the only option due to its minimal advantage because it remains in free particulate suspension in urine and thus maintains a semisolid gelatious state22.

No single technique

During the last decades, several minimally invasive techniques such as ESLW and flexible ureterorenoscopy have been proposed as an alternative to PCNL in the management of large kidney stones. These concurrent methods motivated a considerable effort to improve the technique of PCNL in terms of stone clearance, morbidity and cost efficiency. Presently, there is not a single and universal technique to improve the outcomes of PCNL. The options chosen for the successive steps should be tailored depending on the stone burden and caliceal anatomy, but also the experience and technical environment of each urologic center.

And finally, we should remind ourselves of one of the first dictums of Peter of Aurillac: “You must not believe that you are the only one to do it right”.

Editorial Note: Due to space constraints the reference list has been excluded. Interested readers can email EUT@uroWeb.com for the complete list.

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Figure 2: Galdakao modified supine Valdivia position allowing antegrade and retrograde access to the urinary tract.

Figure 3: Mini-Perc: explanation of the "vacuum cleaner" effect. According to Bernoulli’s principle, for an inward flow, an increase in the speed of the fluid occurs simultaneously with a decrease in pressure.