

Department of Renal Medicine and Transplantation

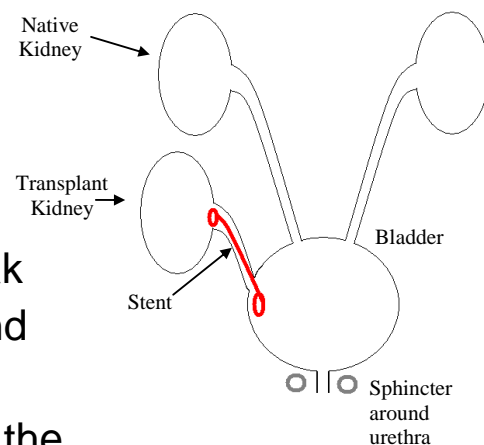
Removal of a ureteric stent following a kidney transplant

This information is for patients who have recently had a kidney transplant and who require a flexible cystoscopy and removal of the ureteric stent. This explains what happens before, during and after the procedure. It also tells you about the risks and side effects involved.

If you have any further questions, please speak to a doctor or nurse caring for you.

What is a ureteric stent?

The ureter is the tube that links the kidney to the bladder. A stent is a plastic tube that is inserted into the ureter at the time of your kidney transplant. It helps to drain urine from the new transplant into your bladder and allow healing. It helps to reduce the risk of urine leak at the new join between the ureter and the bladder. It also helps to prevent narrowing of the ureter where it joins the bladder, which may cause a blockage.



Why does it need to be removed?

- The stent is not needed after two to four weeks, as all the tissues should be healed. It can occasionally be left longer, if advised by your transplant doctor or surgeon.

- Leaving the stent in for too long will increase the risk of urine infection or possible stone formation. These conditions may affect your transplant function.

What is a flexible cystoscopy?

This is an examination of the inside of your bladder, using a fine, soft telescopic tube (the flexible cystoscope).

The cystoscope is inserted through the urethra into the urinary bladder, so that the doctor can see the stent.

What are the risks?

As with any surgical procedure there is a small chance of side-effects or complications such as:

- Infection
- Bleeding
- Risk of damaging the urethra or bladder that may need surgery. This risk is very low.
- Risk of partial or complete blockage of ureter that may need further management. This risk is also very low.

Contact us if you experience:

- Increasing pain or discomfort over your transplanted kidney or bladder area
- A high temperature
- Mild bleeding that does not resolve after two days or if you are passing blood clots at any time.

How can I prepare for removal of a ureteric stent?

- You can take your normal medications.
- You can eat and drink normally unless you have a peritoneal dialysis tube. This may be removed at the same

time as the stent and you may require sedation or general anaesthesia.

- You will be given an antibiotic tablet before the procedure.
- The medical staff will ask you to empty your bladder.
- The procedure will be explained to you and you will be asked to sign a consent form.

Asking for your consent

It is important that you feel involved in decisions about your care. For some treatments, you will be asked to sign a consent form to say that you agree to have the treatment and understand what it involves. You can withdraw your consent at any time, even if you have said 'yes' previously. If you would like more details about our consent process, please ask for a copy of our policy.

What happens during removal of a ureteric stent?

- You will be taken to an operation theatre or a procedure room.
- The doctor will clean the surrounding area of skin with a mild disinfectant.
- Local anaesthetic gel is applied to numb the area, which can be mildly uncomfortable. This takes few minutes to work.
- The cystoscope is gently inserted into the urethra and up into the bladder.
- Men may be asked to cough or try to pass urine to allow the cystoscope to enter the bladder.
- The bladder will then be filled with water. This enables the doctor to see the stent.
- As the stent is removed, you may feel like emptying your bladder.

- The procedure takes only few minutes.

Will I feel any pain?

You may feel some stinging as the cystoscope enters the bladder.

What happens after the stent removal?

- You will be returned to the clinic or ward.
- You will be asked to empty your bladder.
- You may notice some blood in your urine but this should not concern you or delay you going home. Usually, it settles down very quickly.
- You may feel a little burning pain when you pass urine; this will get better after a day or so.
- After discharge from hospital, you can return to your normal activities.

Will I have a follow-up appointment?

You should have a clinic appointment within the next few days to monitor your kidney function and check for any issues.

Contact us

Transplant clinic on 020 8725 2455 (Between 8am and 4pm).
Champneys ward on 020 8725 0062 or 020 8725 1080 (Out of hours).

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.

