Non-Invasive Removal of Ureteric Stents After Renal Transplantation versus Conventional Technique

Introduction and Objective: To compare simple and noninvasive technique for stent extraction after renal transplantation with conventional technique.

Materials and Methods: We included 80 patients that underwent kidney transplantation; ureterocystostomy technique was Bari with double j insertion. This technique in group one (N=40) was conventional and in group 2 (N=40) it was a novel technique where we sutured double-j end to foley tip with vicryl which helps us to extract double-j by foley removal after one week. Group one's data was collected retrospectively.

Results: Mean age for group 1 was 41 and for group 2 it was 40. Male to female ratio was 2:1 for both groups. UTI prevalence during 6 months after surgery in group one was 78.9 % and 52.6% for group 2, probably due to the long existence of double-j in group one (4 weeks vs. 1 week), and double-j extraction with procedures that increase UTI such as cystoscope in group one. There was no difference in perinephric collection rates such as urinoma and lymphocele (2 patients in each group). Ureteral obstruction was reported in 4 patients of group one but none of the patients in group 2 had such complication. Two patients in group 2 had complicated foley removal that managed successfully. **Conclusion:** Use of this novel technique can help us to remove stents earlier and without invasive procedures, which leads to lower complication rates, such as UTI and incrusted dj.