Splenic injury during percutaneous nephrolithotomy.

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Abstract:

BACKGROUND: Injury to the spleen is a recognized complication during percutaneous renal access

due to the close anatomical relationship of the spleen and the left kidney. However, transsplenic

renal access is a rare complication of percutaneous nephrolithotomy and can also result in

considerable morbidity, often requiring emergent splenectomy. METHODS: We present our

experience with splenic injury during percutaneous nephrolithotomy managed conservatively with

the use of a collagen-thrombin hemostatic sealant (D-Stat; Vascular Solutions, Inc., Minneapolis,

MN) after delayed removal of the nephrostomy tubes. RESULTS: The patient had an uneventful

recovery and was discharged home on postoperative day 6. CONCLUSION: In select

hemodynamically stable patients, nonoperative management with the adjunctive use of hemostatic

sealants may be considered.