

PP-005

Supine PCNL in old age octogenarians

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Introduction: PCNL is a traditionally performed in a prone position. This has significant anaesthetic ramifications especially in old age above 80 year.

Purpose: To evaluate the safety and effectiveness of tubeless supine PCNL under spinal anesthesia in old age octogenarians.

Material and Method: We retrospectively reviewed 26 patients who were aged ≥ 80 years underwent supine PCNL at our 2 hospitals between sep2008 and sep2011. Patient's ages, size and position of stones, co morbidities, intervention time, length of hospital stay, complications and success rate were assessed.

Intervention: All patients underwent tubeless PCNL in single stage in supine position and under spinal anesthesia. Puncture and one shot tract dilatation was done under fluoroscopic control preferably through the lower calyx. Pneumatic with or without ultrasonic lithotriptors were used for fragmentation of stones.

Results: Twenty six octogenarians mean age of 83 years (range 80-91 Years) 17 men and 9 female were identified. In most of the patients' collecting system, access was through posterior inferior calyx. In 7(26.9%) patients middle calyceal puncture was made. 34.6% of patients had co morbid disease, hypertension was the most. Average stone size was 30 mm (range 28 to 40 mm).

The total number of patients having complications was 4 (19%), fever was the most complication but no serious complications were developed.

Success was achieved in 84% of patients after one session PCNL.

The average operation time was 90 minutes (range 60 to 120). 3 patients required blood transfusion. Average length of hospital stay was 3.5 days (range 3-5 days).

Conclusion: Increased risks and complications of surgery in the elderly can be reduced by minimizing invasiveness of pcnl procedure by perform it in supine position and under spinal anesthesia rather than waiting complication to develop.

This approach is associated with a shorter hospital stay and fewer complications in elderly patients.