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PCNL as monotherapy for large renal stones in horseshoe kidney even in old age

I. Nazir, I. Muhammed, G. Rashid, A. Muhammed

Department of Urology, Shalamar Medical and Dental College, Lahore, Pakistan

Introduction: The horseshoe kidney is the most frequent renal anomaly, with a prevalence of 0.25% and a male to female ratio of 3:1. Although the pathogenesis remains controversial, the consequences of the impaired urinary drainage are well known: up to two third of patients present with urinary stasis, infection and urolithiasis. Due to the different anatomy open procedures were previously done for stone removal. Stone bulk has been a major contributor in decisions for minimally invasive surgery. Percutaneous nephrolithotomy (PCNL) is a successful procedure for urolithiasis in horseshoe kidneys and if properly done the size of the stone and age should not be limiting factors.

Materials and Methods: A 80 year old gentleman was brought to the emergency with renal failure, investigations revealed a creatinine 11.2, Hb 6. Ultrasound showed large renal stones in both the units of the horseshoe kidney. A CT scan was done to confirm the size of the stones which showed multiple stones with huge stone burden. Bilateral dj stenting brought the creatinine down to 3 and transfusions were given to keep Hb above 10. First procedure a PCNL was done on the right side and pt was made stone free a subsequent PCNL of the left side made him completely stone free.

Results: At the completion of the procedures the pt is stone free and stent free and is maintaining a creatinine of 1.6, and does not require any analgesics or dialysis.

Conclusions: With careful planning keeping the anesthetist in the loop with careful timing of the procedure best results can be achieved. PCNL IS a good procedure and should be the mainstay of treatment of all renal stones larger than 2 cm.

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