

Letter to the Editor Regarding the Article “Treatment of Ureteral Stent-Related Symptoms”: Systematic Review

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Keywords

Medical management · Stent-related symptoms · Ureteral stents

With considerable curiosity, we have read a recent article by Korkes and associates [1]. The article’s focus was on the medical management of stent-related symptoms, specifically the use of alpha antagonists, antimuscarinics, and PDE inhibitors either separately or in combination to lessen the symptoms associated with stents. The distal end of the DJ stent is known to cause pain and voiding symptoms, which is one of the causes contributing to stent-related symptoms [2]. Symptoms can be greatly reduced with a small modification to the ureteral stent. The traditional DJ stent’s lower coil is cut, and its lower end is stitched with a 5-0 mersilk (Fig. 1). Having placed it under fluoroscopy supervision (Fig. 2), we then bring the suture beyond the urethra and sew it to the labia majora in females and the glans penis in males (Fig. 3). We ask the patient to come to the outpatient department on the day of the stent removal. In the office environment itself, we cut the thread and pull the stent together with the thread under all hygienic circumstances. This method can greatly lessen the symptoms associated with the stent

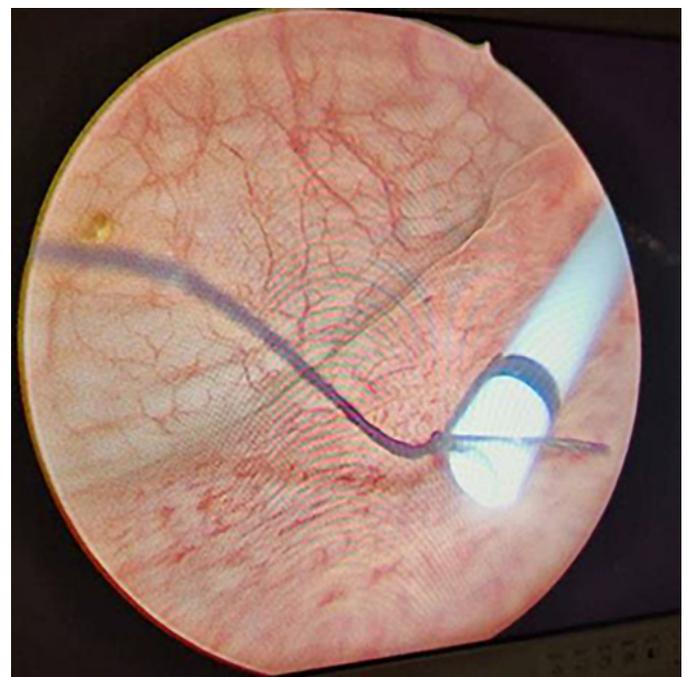


Fig. 1. Suture (5-0 mersilk) tied to the distal end of ureteral stent.

while also saving the patient a great deal of money and time. The evidence in favor of our position comes from a trial [3] in which the DJ stent’s distal coil was taken



Fig. 2. Fluoroscopy image of the distal end of ureteral stent.



Fig. 3. Suture stitched to the glans penis.

out for a custom-made distal coil that had a 0.3 Fr suture that reached the bladder and shown lower SRS and improved tolerance.

Conflict of Interest Statement

The authors have no conflicts of interest to declare.

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References

- 1 Pecoraro A, Peretti D, Tian Z, Aimar R, Niculescu G, Alleva G, et al. Treatment of ureteral stent-related symptoms. *Urol Int.* 2023; 107(3):288–303.
- 2 Al-Hajjaj M, Alam OA, Abu-Hussein B, Muhammad Al Husein HA. Forgotten Double-J ureteral stent: an analysis of 25 cases in a tertiary hospital. *Ann Med Surg.* 2022;80:104223.
- 3 Vogt B, Desgrappes A, Desfemmes FN. Changing the double-pigtail stent by a new suture stent to improve patient's quality of life: a prospective study. *World J Urol.* 2015;33:1061–8.

Author Contributions

Vilas Sabale: substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work. Vikram Satav: final approval of the version to be published. Prabhav Agarwal: drafting the work or reviewing it critically for important intellectual content and agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.