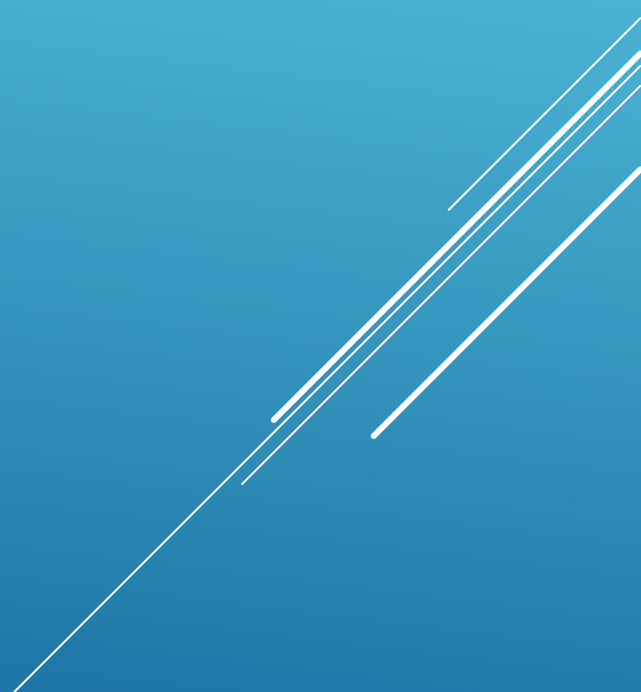


IN THE NAME OF GOD BLADDER CALCULI

By ; Dr HASSANZADEH.KAMALEDDIN MD
UROLOGIST UROONCOLOGIST

▶ ETIOLOGY

5% OF URINARY STONES
1.5% OF HOSPITAL ADMISSIONS
.CLASSIFIED AS
MIGRANT
PRIMARY BLADDER STONES
SECONDARY BLADDER STONES



▶ PRIMARY BLADDER STONES

NUTRITIONAL DEFICIENCY

DECREASED URINE OUTPUT

ALTERATION IN URINE PH

METABOLIC ABNORMALITIES

FIRST 5 YEARS OF LIFE

BOYS


SOLITARY

RARE RECUR AFTER REMOVAL

AMONIUMURATE,CAOX,URIC A,CAPH

▶ SECONDARY BLADDER STONES

ASSOCIATED WITH UNDERLYING
BLADDER PATHOLOGY
MEN OLDER THAN 60 ,UOO,
FOREIGN BODIES ,PESSARIES,CLIPS
PVR,SILK OF DVC,HAIR,
LONG-TERM URINARY CATHETERS,
NEUROGENIC BLADDER ,SCI
MAGNESIUM AMMONIUM PHOSPHATE



► PRESENTATION

THE MOST COMMON PRESENTATION IS
TERMINAL HEMATURIA

LUTS;

,FREQUENCY

,INTERMITTENCY

,URGENCY

,DECREASED FLOW

,URGE INCONTINENCE

,ABDOMINAL PAIN

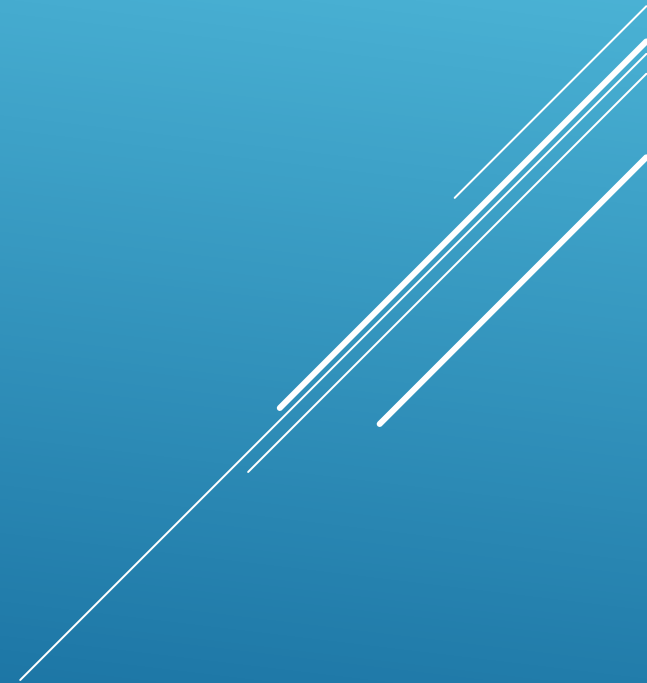
▶ MANAGEMENT OF BLADDER STONES

MEDICAL MANAGEMENT

ESWL

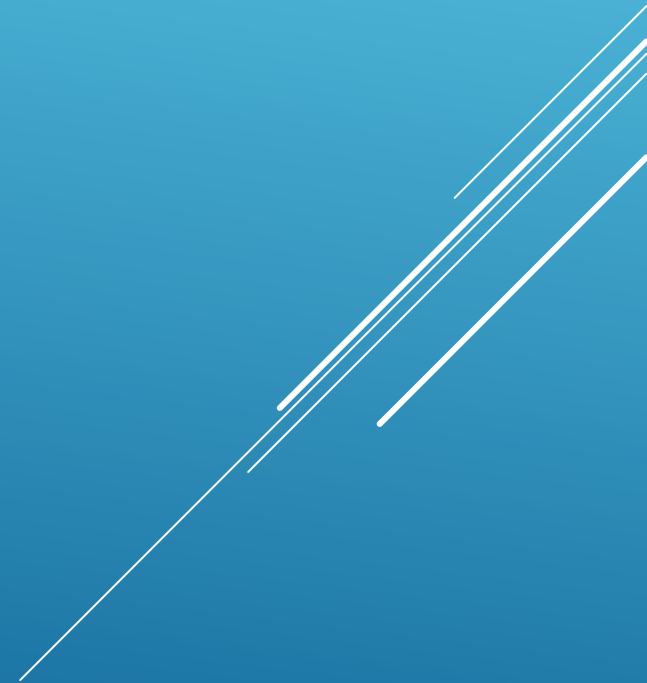
ENDOUROLOGIC APPROACH

OPEN SURGERY



▶ SPECIAL SITUATIONS

BOO AND BLADDER STONES
,URINARY DIVERSIONS AND
,,AUGMENTED BLADDERS
,,,SCI
,,,,RENAL TRANSPLANTATION





THANKS

