What’s Up in Urology Journal, Spring 2009?

Urology for People is a section in the Urology Journal for providing people with a summary of what is published in this journal and describing urological entities in a simple language. The Persian translation of this article is available from www.uj.unrc.ir.

Important Note. The findings in medical papers are usually not directly applicable in clinical practice and patients should consult their physicians before any utilization of the results of medical studies.

YOUR SURGEON PREDICTS WHETHER YOU WILL GET RID OF STONES

Shock wave lithotripsy is a method of treatment of kidney stones by the breaking power of sound waves. So, if you have stones, your surgeon may choose this way to remove it. However, it is not always successful and you may need several sessions of treatment and even switching to another treatment. This depends on the nature of the stone, its size, and its location in your urinary system. Dr Arshadi and his colleagues in Children’s Medical Center of Tehran tried to find an easy way to predict the results of shock wave lithotripsy. In their research project, they categorized the patients into 2 groups with more than 75% chance of fragmentation and with 50% to 75% estimated chance of fragmentation. Their categorizing was based on the shape, location, and density of the stone as seen in radiography films. They found that 92.4% with the predicted higher chance had successful treatment, while 64.4% of those with lower chance had their stones removed. Such an easy prediction can help surgeons to choose the best treatment for the patients with kidney stone. But still only God knows if your treatment will be 100% successful or not!

See page 88 for full-text article

VESICOSTOMY CARE IN CHILDREN: A CHALLENGE FOR THE PARENTS?

Newborns and children with congenital bladder diseases have problems in emptying the bladder and it may lead to irreversible damage to the kidneys. To prevent this, physicians may decide to divert the pathway of urine and make an opening form the bladder out through the abdomen. They put a tube that opens on the skin of the lower abdomen. The child may have to live with the tube for a long time and the parents or caregivers will have a demanding job to take care of the tube and to keep the child dry. Special diapers should be used during the day and the caregiver should be trained for this. Dr Prudente and his colleagues in Sao Paolo, Brazil, decided to re-evaluate the status of their patients with vesicostomy. They reported that the treatment outcome was favorable, but they also tried to see if the parents and caregivers were used to the job. Subjective evaluation of 20 cases showed that 18 children remained dry during the day and 14 caregivers/parents felt they had acquired the skills necessary to handle a patient with vesicostomy. They gave an average satisfaction score of 8.7 to vesicostomy. Dr Prudente and his colleagues concluded that vesicostomy is a simple surgery that protects the urinary tract system of the child, and that there was adequate adjustment to vesicostomy and a positive overall evaluation as reported by the parents and caregivers.

See page 96 for full-text article

URINARY CONSEQUENCES OF MUSTARD GAS IN VETERANS

Mustard gas is a fatal weapon that has been rarely used in wars. However, the Iranian experienced
exposing to this brutal weapon several times during their war against Iraq in 1980s. Now, the physicians in Iran have a huge population of patients with long-term effects of mustard gas. The most affected organs by mustard are the lungs, the skin, and blood. However, not all the destructive effects of this weapon are known. Studies on animals have shown that immediately after exposure, the gas is diffused rapidly throughout the body, especially the kidneys. Based on this knowledge, Dr Soroush and his colleagues at Janbazan Medical and Engineering Research Center did a survey on 289 Iranian male veterans to see if they have had any kidney and urinary disorders during the past 20 years of living with the mustard-induced diseases. Fifty veterans (17.3%) had experienced urinary stones, 25 (8.7%) had recurrent urinary tract infections, and 2 (0.7%) had kidney failure. None of them had experienced cancer of the urinary tract. Therefore, they concluded that fortunately, mustard gas seems to not have any major effect on the kidneys and the urinary tract. However, they cannot say this strongly, because they relied only on what the veterans reported. The next step is to do clinical and laboratory examinations to confirm this finding.

See page 114 for full-text article

AVICENNA’S AND BLADDER DISEASES

The Canon of Medicine of Avicenna, the Iranian scientist, has a great amount of interesting information on every organ of the body. That is why Dr Madineh has continued his job of reviewing Avicenna’s notes on bladder disease in the third part of his article series on history of medicine. Avicenna had explained bladder infection, pelvic abscess, urethritis, cystitis, prostatitis, bladder tumors, bladder dysfunction, urinary retention, and neurogenic bladder. The interesting point is that although the causes of diseases like cancer was not known 10 centuries ago, Avicenna had described almost all diseases of the bladder. His approach to diagnosis complies with the modern methodology, and even in some interventions such as routes of drug administration and catheterization, his points are astonishing.

See page 138 for full-text article