WHAT IS NEPHROLITHIASIS? (KIDNEY STONES)

Nephrolithiasis and renal lithiasis are medical terms for kidney stones. Incidence of kidney stone formation is fairly high and up to ten in 100 people may get at least one stone in their lifetime. It’s usually impossible to miss this condition due to its symptoms, but the exact meaning of the condition in terms of long-term health may dependent on the type of stones that develop.

It helps to understand some of the different types of stones that occur in nephrolithiasis. These include struvite stones, which typically form around infectious matter in the kidneys. Some people develop calcium or calcitestones that may be due to high levels of calcium oxalate. Those with high uric acid levels may have uric acid stones, or sometimes stones are composed primarily of certain amino acids (cystine stones). Other times cause of formation is not fully clear.

The symptoms associated with nephrolithiasis are usually difficult to miss. Most people feel significant pain that occurs just below the ribs or in the stomach, pelvis and groin. Urinating tends to cause discomfort and people may feel constant urge to use the bathroom. When urine is produced the color could be brown or pink, or possibly bright red. When people have struvite stones, they may also have signs of nephrolithiasis with fever and flulike symptoms.

Though many people are able to pass a kidney stone without additional help, the discomfort can increase and complications may sometimes result. Pain can become so bad that nausea and vomiting begin or fever jumps very high. If pain reaches an intolerable level, people are advised to get medical help. Diagnosing kidney stones can lead to treatment and help to determine if underlying conditions need intervention on a regular basis to prevent future stones.

Diagnosis of nephrolithiasis doesn’t necessarily mean huge interventions. If infection is suspected, antibiotics might be given. Large stones may not be able to pass and doctors might consider different methods for breaking them up, including surgical removal or the use of scopes or radiofrequency to break up and remove stones. For fairly small stones, normal treatment typically consists of getting the affected person to increase water intake significantly and giving supportive medications such as over the counter pain relievers to reduce discomfort, until the stone passes.

High levels of uric acid, high amino acid levels or high calcium levels that cause nephrolithiasis might suggest conditions that could require continued medical care even though the stone has passed. Doctors usually want to analyze stones to identify their origin so they know what steps to take to prevent future stones from forming. Treatment to avoid nephrolithiasis may take many forms depending
on the type of stone, but not all people will require additional treatment after passage of the stone.