Tethered stent insertion

Information for patients

This sheet answers common questions about having a tethered stent. If you would like further information, or have any particular worries, please do not hesitate to ask your nurse or doctor.

In all cases, a doctor will explain the procedure to you and answer any questions you may have.

What is a ureteric stent?
A ureteric stent is a soft plastic hollow tube, like a straw, which is inserted into the tube (called the ureter) between your kidney and bladder to improve the drainage of urine. Stents are inserted after operations such as stone removal.

What is a tethered stent?
Your surgeon has identified that you may be suitable for a tethered stent otherwise known as a ‘stent on a string’.

A tethered stent is the same as a normal ureteric stent on the inside of the body. However it has a cotton string attached to the tip in the bladder that passes through the water pipe. It is attached outside the body to the thigh in a female and the penis in a male with a small dressing.

What does the procedure involve?
Before carrying out the procedure, we will inspect the bladder via a telescope through the urethra (water pipe).

A stent is inserted into the ureter. This is usually done under x-ray guidance. This procedure is generally performed while you are under a general anaesthetic (ie asleep). Sometimes, due to other medical conditions, your anaesthetist may discuss with you the option of having a spinal anaesthetic instead.

Find out more about having an anaesthetic here: www.royalfree.nhs.uk/anaesthetics

Do I have to have a tethered stent?
No. It is your decision whether you would like to have a tethered stent after discussion of the risks and benefits with your surgeon.

What are the advantages of a tethered stent?
You need a stent to ensure there is drainage of urine from the kidney to the bladder after your operation.
The main advantage of having a tethered stent is that it will be in place for a shorter amount of time than a ‘normal’ stent (usually two to five days compared to three to six weeks). As stents can be uncomfortable, many patients who have had both types of stents would recommend a tethered stent.

The other advantage of a tethered stent is that they are easier to remove than a ‘normal’ stent, which needs a telescope test and grasper to remove.

What are the disadvantages of a tethered stent?
Around 1 in 10 patients accidentally pull out or dislodge their stents too early. Usually this is not dangerous, but in some patients this can lead to the kidney becoming blocked and a new stent needing to be fitted as an emergency. If your surgeon thinks you may be at an increased risk of infection or blockage if the stent became dislodged, you will not be offered a tethered stent. However, there is always a small risk.

Some people also find the strings of the stent uncomfortable and may temporarily leak some urine while it is in place.

What are the risks of stents?

**Common (more than 1 in 10)**
- burning or discomfort on passing urine.
- blood in your urine
- discomfort in your back when you move or pass urine
- inability to empty your bladder, requiring temporary placement of a catheter (tube through the water pipe to the bladder)
- even if you have agreed to a tethered stent, your surgeon may still place a ‘normal’ stent depending on the operation.

**Occasional (1 in 30)**
- stent dislodgement leading to a blockage of the kidney. This requires emergency re-insertion.
- urine infection needing antibiotics
- inability to insert or remove the stent – a different procedure will be performed if this occurs

**Rare (1 in 50)**
- delayed bleeding and clot formation needing more surgery to remove clot and stop the bleeding
- injury to the urethra (water pipe) causing delayed scar formation

**Giving my consent (permission)**
We want to involve you in decisions about your care and treatment. Before carrying out any procedure, staff will explain the procedure to you, along with the associated risks, benefits and alternatives. If you have any questions about your care, or any concerns, please do not hesitate to ask for more information.

If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.
After the procedure

- When you get home you should drink plenty of fluid.
- You can pass urine as normal. Be careful to avoid pulling on the strings.
- Try not to remove the dressing which keeps the stent in place. It is waterproof so you may shower as normal.
- You may find that when you pass urine it stings or burns or is blood stained.
- You may want to pass urine more frequently, have tummy pain, pain in the back and sometimes men experience some pain at the tip of the penis.
- You may notice a small amount of urine dripping onto your pants along the string. We would advise you to use a pad to soak this up but contact the department if it is severe.

These symptoms are common and are not a cause for concern.

If you develop a fever, severe pain on passing urine, inability to pass urine or worsening bleeding you should see your GP immediately or visit your nearest emergency department.

If you accidentally remove your stent on a string please contact the urology department or if you feel unwell, visit your nearest emergency department.

How will my tethered stent be removed?
You will be given details of where to attend for your stent removal. A doctor will remove the stent by gently pulling on the strings. This usually takes less than 10 seconds.

Information about your stent – please complete

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<thead>
<tr>
<th>Patient’s name:</th>
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<tbody>
<tr>
<td>Date of birth:</td>
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<td>Hospital number:</td>
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<td>Consultant in charge:</td>
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<td>Date stent inserted:</td>
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<td>Left ☐  Right ☑</td>
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<tr>
<td>Details of stent removal date and location:</td>
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Contact information
Urology department contact: 020 7317 7721 extension 33068 and choose option 3 ‘kidney stone team’

For more information about the urology service at the Royal Free London, please visit our website: www.royalfree.nhs.uk/services/services-a-z/urology
If you have any feedback on this leaflet or for a list of references for it, please email: rf.communications@nhs.net

This leaflet is also available in large print. If you need this leaflet in another format – for example Braille, a language other than English or audio – please ask a member of staff.

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