

Is It a Kidney Stone, Food Poisoning, Back Strain or Appendicitis? Kidney Stones Strike One of Ten People

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Is It a Kidney Stone, Food Poisoning, Back Strain or Appendicitis? Kidney Stones Strike One of Ten People

DENVILLE, N.J. Nov. 18, 2010 – Kidney stones are very common and affect individuals of all ages. Although the pain of passing a stone may be excruciating, the signs and symptoms of developing stones may be hard for the general public to interpret correctly. They may be mistaken for food poisoning, abdominal pain, appendicitis, muscular back pain or other problems. The good news is that most treatment options today are minimally invasive procedures and involve lifestyle changes rather than invasive open surgery.

Statistics indicate that one out of every 10 people in the U.S. will develop stones in the urinary tract at some point in their lives.¹ Caucasian men are in the highest risk group. Stones are generally more common in men than women, though there is a higher incidence in pregnant women than in the general public.

“Once you have a kidney stone there is a 10 percent chance of recurrence in the first year, which increases to a 50 percent recurrence in the next five years,” explained Gregg E. Zimmerman, M.D., of Morris Urology, a division of Garden State Urology, and the medical director of robotic surgery at Saint Clare’s Hospital. Dr. Zimmerman is one of the few fellowship-trained urologic oncologists in northern Jersey with expertise in robotic surgery. “People with a predisposition to kidney stones must learn to carefully recognize the clues of a developing stone and make changes in their daily lives to minimize the chances of recurrence.”

What Are Kidney Stones?

Some patients are at risk for developing crystals in their urine, which can progress into kidney stones. Small stones may pass through the urinary tract, but larger stones may block the flow of urine and cause pain. Kidney stones vary in size from as small as a grain of sand to as large as a golf ball.

There are many different types of stones, but these are the most common:

- **Calcium Stones:** 70 to 90 percent of all stones are calcium oxylate stones.

- **Uric Acid Stones:** Approximately 10 percent of kidney stones are uric acid stones and are associated with gout and acid urine.
- **Struvite Stones:** Less than 10 percent of stones are struvite stones, and they can be large in size. These often form after chronic infections occur, e.g., urinary tract infections; they contain magnesium, ammonia and phosphate.
- **Cystine Stones:** These are rare, genetic and result from a cystine buildup in the urine. Cystine is a material that is essential for the development of muscles, nerves and other parts of the body.

Risk Factors

According to [WebMD](#), there are a number of risk factors for kidney stones. These include dehydration, gout, high blood pressure, inflammatory bowel diseases (Crohn's disease, colitis), intestinal surgeries (gastric bypass), recurring urinary tract infections, hyperparathyroidism, any disease causing immobility, family history and low estrogen, such as in postmenopausal women.²

Signs and Symptoms

Kidney stones, while in the kidney, typically do not cause discomfort; however, once they pass into the ureter, they can be extremely painful. Warning signs include the following:

- Persistent back pain that radiates to the groin, abdominal pain
- Blood in urine
- Fever and chills
- Vomiting
- Cloudy urine with an unusual or foul smell
- Burning sensation when urinating

Diagnosis and Treatment

The tests commonly done to diagnose kidney stones include urinalysis, blood work, CAT scans and abdominal x-rays. The treatment plan will depend on the size and location of the kidney stone as well as how the patient looks, e.g., age, physical condition and overall health. Kidney stones that are less than 5mm in size have a greater than 50 percent probability of passing spontaneously. Those that are greater than 5mm in size generally require intervention. "For stones in the kidney that are less than 5mm, we watch and make sure they don't grow or move, unless a patient has other health problems or extenuating circumstances that warrant more aggressive treatment," said Dr. Zimmerman.

For kidney stones that do not pass naturally, there are several treatment options.

- **Extracorporeal Shock Wave Lithotripsy (ESWL).** This procedure is the most minimally invasive, and in some cases used as a preventive measure. Ultrasound waves are used to break up the kidney stone(s) in the ureters so they are small enough to pass through the urinary system.

- **Ureteroscope.** This is another minimally invasive treatment in which a lighted telescope is used to remove stones in the ureters. Sometimes this treatment is used with a laser to break up the stones, which can then be removed with a basket.
- **Percutaneous Nephrolithotomy (PCNL).** Although minimally invasive, this procedure to remove larger stones, in which the urologist makes a small incision in the patient's back to remove the stone, is not commonly used.

Invasive open surgery for stones is only used in vary rare circumstances.

After treatment, *follow-up is important*. Follow-up tests include periodic blood work, x-rays and in some cases a 24-hour urine analysis. Lifestyle, dietary and other daily adjustments may be recommended based on results.

Prevention

There are steps to take that can help to prevent kidney stones from occurring or reoccurring, as follows:³

- Keep hydrated by drinking water all year round.
- Decrease salt intake.
- Decrease protein and fat in the diet.
- Increase lemon intake.
- Limit intake of vitamins C and D.
- Limit consumption of alcohol.
- Use prescribed medication.

About the Kidney

The human body has two kidneys, which are located in the middle of the back, below the ribcage and on each side of the spine. Their function is to process blood and dispel waste and water, which becomes urine. The urine flows through small tubes, called ureters, into the bladder. There the urine is stored until there is enough to release. The waste from the processed blood comes from normal muscle breakdown and food ingested. After the body takes the nutrients from the digested food, it sends the waste to the kidneys for processing. In addition, the kidney function can affect blood pressure, and they produce red blood cells and help keep bones strong and healthy.

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About Dr. Zimmerman

Gregg E. Zimmerman, M.D., of Morris Urology, a division of Garden State Urology, is also the director of robotic surgery at Saint Clare's Hospital. He is a leading member of the multidisciplinary oncology team when it comes to urologic care. He is one of the few fellowship-trained urologic oncologists in North Jersey with expertise in robotic surgery. He is also on the faculty of Morristown Memorial Hospital.

Zimmerman practices all aspects of urology, including treatment for prostate, kidney, bladder and testicular cancers; BPH; kidney stones; infertility; incontinence and overactive bladder; and pediatrics. He specializes in robotic and laparoscopic techniques.

Zimmerman earned his medical degree from the State University of New York at Stony Brook and completed his residency training in urology at the University of Florida. He completed his urologic oncology fellowship at Roswell Park Cancer Institute in Buffalo, N.Y., with specialty training in robotic surgery and advanced laparoscopy.

About Morris Urology

Marc Colton, M.D., Gregg Zimmerman, M.D., and Michael Ingber, M.D. offer state-of-the-art urologic care at Morris Urology, a division of Garden State Urology, based in Denville, N.J. The practice treats all aspects of urologic disease, including bladder, kidney and prostate cancers; kidney stones; and urinary incontinence. The practice is located at 16 Pocono Road, Suite 205, Denville, NJ 07834. Tel: 973.627.0060, Fax: 973.627.6821, www.morrisurology.com.

¹ http://www.kidney.niddk.nih.gov/kudiseases/pubs/stones_ez/

² <http://www.webmd.com/kidney-stones/kidney-stones-what-increases-your-risk>

³ <http://www.healthscout.com/ency/68/137/main.html#PreventionofKidneyStones>