Discussion: No patients was seen within the time limits set by the NICE guidelines. Patient pathway for bladder cancer patients is inadequate and in need of resource allocation to meet with best practice.

A case series of antegrade ureteric stent insertion using a novel technique

M.S. Aboelmagd[1,2], S. Anderson[1], S. O'Meara[1], S. Considine[1], S. Connolly[1], D. Galvin[1], K.J. O'Malley[1], Y. Imarli[2], I. Salman[2], S. Soliman[2], J. Al Shareef[2], N. Hegarty[1]
[1]Dept. of Urology, Mater Misericordiae University Hospital, Eccles Street, Dublin 7; [2]Dept. of Urology Al-Hada Armed forces hospitals, Taif region, Saudi Arabia

Introduction: The antegrade insertion of ureteric stents is a commonly performed procedure for cases of obstructive uropathy. Incorrect stent placement remains an issue. Stent migration at the time of insertion can result in the proximal coil resting within the proximal ureter or renal parenchyma. We describe a novel technique of ensuring correct stent placement through repositioning the string of the stent.

Methods: Our technique is performed using standard ureteric double J stents, modified by the operating surgeon and independent of industry. The method involves repositioning the string placement of the proximal end to immediately distal to the proximal coil. We present a short animation video of this technique.

Results: Between September 2013 and March 2016, 23 antegrade ureteric stents were inserted using the above technique. Post-operative cross-sectional imaging was used to confirm stent position. Incorrect placement was avoided in all cases, and no cases required further stent manipulation.

Conclusions: Although similarly designed stents are now available on the market, the above technique, which has not been previously reported, provides a simple method of ensuring proper antegrade stent position using all standard double J stents.