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Donor and post-transplant ureteroscopy for stone disease in patients with renal transplant - Evidence from a systematic review

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Introduction & Objectives: Renal transplant remains the gold standard treatment for end stage kidney disease. Urolithiasis was traditionally considered a contraindication to transplant and a cause of rare but significant morbidity in the post-transplant setting. With advancements in technology ureteroscopy (URS) is increasingly performed to treat urolithiasis associated with renal transplant. Here we review the challenges and complications of pre and post-transplant URS.

Materials & Methods: A Cochrane style review was performed in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-analyses guidelines to evaluate the outcomes of donor and post-transplant URS for stone disease, including all English language articles between January 1996 and December 2018.

Results: Eighteen articles (167 patients), seven ex-vivo or donor URS and 11 post-transplant URS met inclusion criteria and were included in the review. A pre-transplant URS showed a stone-free rate (SFR) of 100% with an overall complication rate of 7.5% (four Clavien I and one Clavien ≥ 3), where as a post-transplant URS showed SFR of 100% in five studies and 60–91% in four studies with an overall complication rate of 12.9% (10 Clavien I and three Clavien ≥ 3).

Conclusions: Advancements in endourological technique have made URS for donor and post-transplant urolithiasis a safe and effective procedure. Although data were based on small retrospective case series, it shows that in experienced centres it can be performed with low morbidity and a high SFR.