

EFFECT OF TAMSULOSIN ON TREATMENT OF PROXIMAL URETER STONE IN PATIENTS WHO WERE MANAGED CONSERVATIVELY

Hypothesis / aims of study

With the aim of effective treatment option for proximal ureter stone, we investigated efficacy of tamsulosin in patients with proximal ureter stone.

Study design, materials and methods

Patients who underwent conservative management for proximal ureter stone were reviewed. Patients who cannot confirm whether stone was passed out or not such as loss of follow-up or incomplete date of urinalysis, KUB, or computed tomography were excluded from the analysis. Treatment failure was defined as remaining previous ureter stone after more than minimum of 8 weeks. Comparative analyses between treatment success and failure group were performed with age, gender, diabetes, hypertension, stone size, grade of hydronephrosis, rim sign on computed tomography, steroid medication, and tamsulosin medication.

Results

Among the total of 73 patients, 14 patients were failed to stone passage, while remaining 59 patients experienced stone passage. The gender, stone size, grade of hydronephrosis, rim sign on computed tomography, steroid medication, diabetes, hypertension were not different between treatment success and failure group. Fifty-three patients took tamsulosin medication. Of these, 9 (17%) patients were failed to treatment, while 5 (25%) of the 20 patients who did not were failed to treatment. The rates of treatment failure were slightly low in patients who took tamsulosin compared to those of patients who did not. However, there was no significant difference between them ($p=0.509$). On multivariable analysis, all these variables were not associated with treatment success for proximal ureter stone in patients who were managed conservatively.

Interpretation of results

Although the rates of treatment failure in patients who took tamsulosin were lower than those in patients who did not, it was not affect to treatment success for proximal ureter stone.

Concluding message

Tamsulosin medication was not considered as effective treatment option for proximal ureter stone in our study. Further well designed study would be needed to confirm these findings.

Disclosures

Funding: none **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** retrospective study **Helsinki:** Yes **Informed Consent:** No