

Ureteric Colic and Homoeopathy

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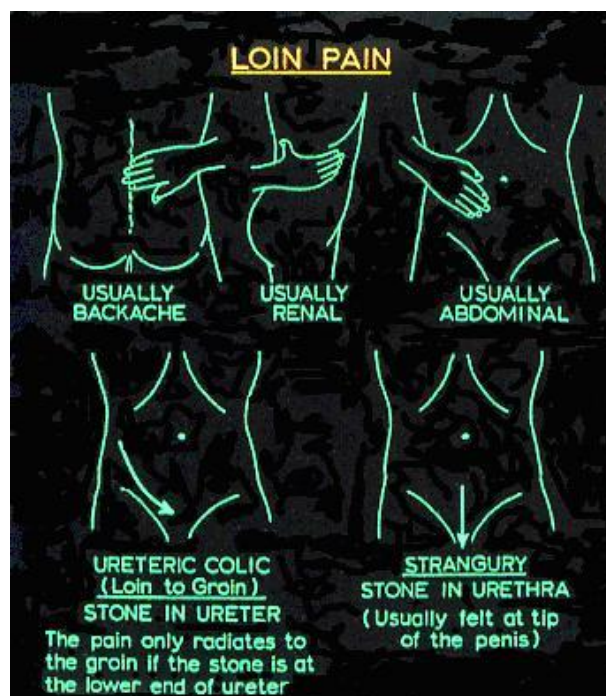
DEFINITION

Ureteric colic is a pain due to the passage of a stone through the ureter.

CLINICAL PICTURE

Ureteric colic starts suddenly with pain in the loin. The pain radiates from the affected ureter to the front of the abdomen and down to the groin. Occasionally it can also radiate into the testicle in a man and to the labia in a woman.

The degree of pain is very severe. The patient becomes very restless and uncomfortable and may want to lick the room. Typically each episode may last for half to one hour. It is often spasmodic and tends to come and go with an hour or two between attacks. The pain is caused by the stone passing down the ureter or due to its trial to pass down.



The pain is so intense that the patient may have nausea and vomiting. There may be a rise in temperature if there is an associated urinary tract infection. The stone lodged in the very lowest part of the ureter may cause marked urgency to pass urine. Anatomically, the last 02 cms of ureter are in the bladder wall. The irritation produced by the stone in the bladder wall causes the urgency to urinate.

CLINICAL EXAMINATION

Abdominal examination may be unremarkable. There may be no tenderness except the severe pain. Tenderness is elicited in the presence of infection along with raised temperature.

DIFFERENTIAL DIAGNOSIS

Ureteric stones may be misdiagnosed with the following:

- Pyelonephritis
- Abdominal aortic aneurysm
- Appendicitis
- Biliary colic
- Peritonitis
- Diverticulitis
- Salpingitis
- Torted ovarian cyst
- Ectopic pregnancy
- Herpes zoster

LABORATORY INVESTIGATIONS

BLOOD TESTS

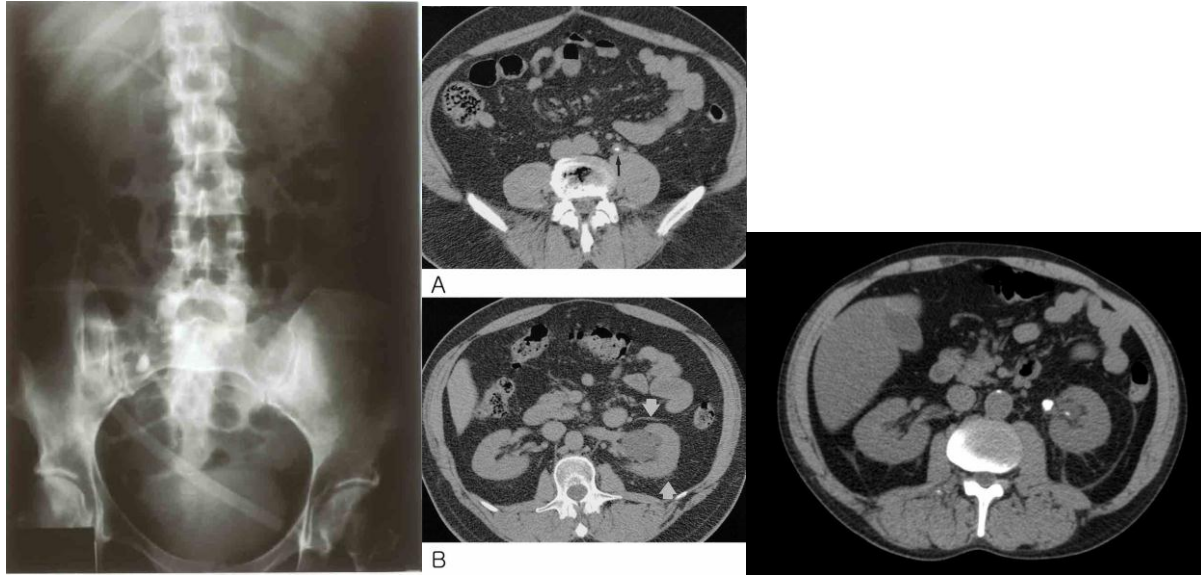
- Complete blood count. White blood cells in the blood are raised in infection.
- Serum calcium.
- Urea and creatinine to assess renal function.

URINE TESTS

- Haematuria. The vast majority of stones have microscopic haematuria.
- MSU (mid stream specimen of urine) may detect infection.

RADIOLOGY

- KUB (Kidney Ureter and Bladder plain x ray). 90% of stones are radio-opaque and can be seen on x ray.
- IVU (IntraVenous Urogram) may show stones and any obstruction.
- Spiral CT is the most accurate method of detecting stones.
- Retrograde ureterography may be performed in doubtful cases.
- Ultrasound is not routinely used to diagnose stones. It is however used to visualize stone during ESWL (EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY).



Right lower ureteric stone

Mid ureteric stone

Left Ureterovesical junction stone

STONE EXAMINATION

Any recovered stone should be analyzed biochemically. The stones may be-

Calcium oxalate stones- 80% of stones, dark brown, radio-opaque and show on an x ray.



Oxalate stone

Calcium/magnesium phosphate stones-10% of all stones, radio-opaque and light brown in colour.



Phosphate stone

Struvite stones- formed from infections.



Struvite stone

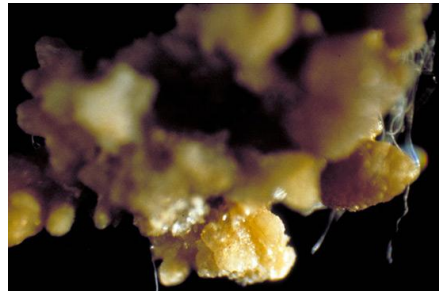
Uric acid stones- up to 10% of all stones, radiolucent and do not show on an x ray.



Urate stone

Uric acid stone

Cystine stones- rare, radio-opaque.



Cystine stone

FURTHER INVESTIGATIONS

- Raised serum calcium (hypercalcaemia) needs further investigations. Primary hyperparathyroidism is one cause.
- A raised serum uric acid is treated accordingly.
- 24 hour urine collections to measure output of calcium urate or Cystine.

HOMOEOPATHIC TREATMENT













- Top ten Homoeopathic Remedies for Ureteric Colic-
- berb. > canth. > bell. > oci. > ter. > pareir. > apis > arg-n. > lyc. > coc-c.








REPERTORY OF URETERIC COMPLAINTS

- BURNING, pain - extending, to - ureters, along bell. cedr. pin-s. ter.
- BURNING, pain – ureters bell. cedr. pin-s. ter.
- Calculus ureters med.
- COLIC, kidney, pain - bleeding, with, of ureters, provoked by passage of stones canth. Pareir.
- COLIC, kidney, pain - radiates, from left to groin, following course of ureter berb. Pareir.
- COLIC, kidney, pain - right - right ureter to bladder LYC. sars.
- CONSTRICTING, pain - extending, to - down, ureters to penis, pressure on glans amel., at times pain goes upward canth.
- CONTRACTING, pain - down, ureters, to penis CANTH.
- CONTRACTION - ureters, extending to penis, pressure amel. CANTH.
- CONTRACTION, muscles and tendons - parts, of, supplied with involuntary muscles, as intestines, ureters, etc., with intense pain Tab.
- CRAMPING, pain – ureters nit-ac. polyg-h.
- CUTTING, pain – ureters aesc. Apis Arg-n. Arn. Ars. aspar. BELL. Benz-ac. BERB. cann-s. Canth. CARB-AN. chlol. coc-c. colch. con. Dios. equis-h. erig. eup-pur. indg. kali-ar. Kali-c. Lach. LYC. Med. nat-s. Nux-m. Nux-v. Oci. Op. PAREIR. Phos. psor. SARS. senec. sep. sil. Tab. VERAT. zinc-p. zinc.
- CUTTING, pain, bladder – ureters bell. berb. carb-an. lyc. pareir. polyg-h. Sars. sep. ter. verat.
- DRAGGING, pain, extending to bladder - dragging, ureters, like labor pain with urging to urinate Cham.
- DRAWING, pain – ureters astac. berb. calad. cham. coc-c. Nat-m. sulph. thuj.
- Gravel ureter hedeo.
- HEAT - Ureters; in cedr.
- INFLAMMATION – Ureters arn. Canth. ter.
- INFLAMMATION - ureters, urethritis arn. CANTH. ter.
- INFLAMMATION, kidneys - ureters, acute acon. arn. Ars. aur. Bell. Benz-ac. berb. bry. Cann-s. Canth. chim. chin. chinin-s. Cop. Cupr-ar. epig. Ferr. hecla hep. juni-c. kali-bi. Merc-c. nit-ac. ol-sant. pareir. Puls. Rhus-t. sep. sil. stigm. sulph. ter. thuj. Tritic. Uva Verat-v.
- IRRITATION – Ureters spirae.
- LABOR-like, pains, along ureters, dragging, with frequent urging to urinate Cham.
- LANCINATING, pain - acute, prolonged, extending from left ureter into bladder coc-c.
- PAIN - burning - extending - along ureters cedr. pin-s.
- PAIN - burning - extending - ureters, along cedr. pin-s.
- PAIN - burning – ureters cedr. pin-s. ter.
- PAIN - constricting - extending - ureters, down to penis, pressure on glans amel., at times pain goes upward canth.
- PAIN - constricting - extending, bladder, to - ureters, down to penis, pressure on glans amel., at times pain goes upward canth.
- PAIN - constricting, extending - down ureters to penis, pressure on glans amel., at times pain goes upward canth.
- PAIN - contracting - down ureters to penis CANTH.
- PAIN - contracting - ureters, down to penis CANTH.
- PAIN - cramping – ureters nit-ac. polyg-h.
- PAIN - cutting – ureters aesc. Apis Arg-n. Arn. Ars. aspar. BELL. Benz-ac. BERB. cann-s. Canth. CARB-AN. chlol. coc-c. colch. con. Dios. equis-h. erig. eup-pur. indg. kali-ar. Kali-c. Lach. LYC. Med. nat-s. Nux-m. Nux-v. Oci. Op. PAREIR. Phos. psor. SARS. senec. sep. sil. Tab. VERAT. zinc-phic. zinc.
- PAIN - cutting – ureters aesc. Apis Arg-n. Arn. Ars. aspar. BELL. Benz-ac. BERB. cann-s. Canth. CARB-AN. chlol. coc-c. colch. con. Dios. equis-h. erig. eup-pur. indg. kali-ar. Kali-c. Lach. LYC. Med. nat-s. Nux-m. Nux-v. Oci. Op. PAREIR. Phos. psor. SARS. senec. sep. sil. Tab. VERAT. zinc.
- PAIN - dragging - labor pain, like, ureters, with urging to urinate CHAM.
- PAIN - dragging - ureters, like labor pain with urging to urinate Cham.

- PAIN - drawing – ureters **berb. cham. Nat-m. sulph. thuj.**
- PAIN - extending - ureters, along **bell. BERB. canth. cedr. IPOM-P. pareir. pin-s. ter.**
- PAIN - General - region of - extending to – ureters **berb. canth. chel. oci. phyt.**
- PAIN - General – ureters **arg-n. coc-c. ozone scroph-n.**
- PAIN - piercing - ureters, with urging to urinate **nat-s.**
- PAIN - piercing in both ureters, with urging to urinate **nat-s.**
- PAIN - region of - extending to – ureters **berb. canth. chel. oci. phyt.**
- PAIN - region of - extending to – ureters **canth. chel. oci. phyt.**
- PAIN - region of - right - extending to ureters **canth.**
- PAIN - sore, bruised – ureters **apis berb. oci.**
- PAIN - sore, tender – ureters **apis berb. oci.**
- PAIN - stitching, stinging, sticking - extending to - ureters, down **apis arg-n. bell. BERB. calad. Chel. coc-c. cupr-act. KALI-BI. Lach. LYC. pareir. tab. ter.**
- PAIN - stitching, stinging, sticking – ureters **carl. cere-b.**
- PAIN - tearing - ureters, extending downward, touch, motion and inspiration **agg. arg-n. bell.**
- PAIN – ureters **aesc. agar. aloe apis arg-n. bell. benz-ac. berb. bov. calad. cann-i. cann-s. canth. carl. cedr. cere-b. clem. coc-c. con. dios. epig. hedeo. indg. ipom-p. kali-c. lith-c. lyc. nat-m. nat-s. nit-ac. nux-v. oci. ozone pareir. polyg-h. sars. scroph-n. tab. tarent. thuj. zinc-phic.**
- PAIN, kidneys - left, in - paroxysms of pain running along ureter and in back, with **Ipom-p.**
- PAIN, kidneys - region, of kidneys - extending, to – ureters **berb. canth. chel. oci. phyt.**
- PAIN, kidneys – ureters **Aesc. agar. aloe Apis arg-n. benz-ac. Berb. bor-ac. calad. calc. cann-i. cann-s. Canth. Chel. chinin-s. clem. coc-c. con. Dios. epig. equis-h. gal-ac. Hedeo. hydrang. indg. Ipom-p. kali-c. lith-c. LYC. mel-c-s. merc. Nux-v. Oci. ozone Pareir. phyt. pic-ac. Sars. scroph-n. sep. tab. tarent. Ter. urt-u. uva**
- partial heat - in ureters **cedr.**
- Passing - ureters, calculus were **med.**
- PIERCING, pain, in both ureters, with urging to urinate **Berb. nat-s.**
- RESTLESS sensation – ureters **phyt.**
- SHARP, pain - downward, apparently through ureters **Lach.**
- SHARP, pain - extending, to - ureters, down **apis arg-n. bell. BERB. calad. Chel. coc-c. cupr-act. KALI-BI. Lach. LYC. pareir. tab. ter.**
- SHARP, pain - extending, to - ureters, down, worse touch or motion, deep inspiration **arg-n.**
- SHOOTING, pain - ureters, from below upward, in left - down left ureter **berb. pareir.**
- SHOOTING, pain - ureters, from below upward, in left **aesc.**
- SORE, pain – ureters **apis berb. oci.**
- SORE, pain, tender – ureters **apis berb. oci.**
- Squeezing ureter **op.**
- STINGING, pain - ureters, in left **calad.**
- Stone - impacted in left ureter **cere-b.**
- Stone - passing ureters **med.**
- TEARING, pain - ureters, extending downwards, touch, motion and inspiration **agg. arg-n. bell.**
- TUMORS – Ureters **Anil.**
- Ureter calculus **cere-b.**
- Ureter pinching **scroph-n.**
- Ureters **apis Bell. Berb. canth. carb-an. Lyc. oci. par. polyg-h. SARS. sep. ter. verat.**
- Ureters boiling **cedr.**
- Ureters calculus **med.**
- URGING, ureters, night, when bladder is empty **cund.**

REFERENCES

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-  Encyclopedia Homoeopathica
-  Chapter 97. Urologic Stone Disease Tintinalli's Emergency Medicine
-  Renal & Ureteral Stones Smith's General Urology > Chapter 16. Urinary Stone Disease
-  Ureteral Stone CURRENT Diagnosis & Treatment: Surgery, 13e > Chapter 38. Urology > Calculi
-  Urolithiasis Schwartz's Principles of Surgery > Chapter 40. Urology > Upper Urinary Tract Obstruction
-  Calcifications and Opacities CURRENT Diagnosis & Treatment Emergency Medicine, 7e > Chapter 15. Abdominal Pain > Further Evaluation of the Patient with Abdominal Pain > Radiologic Examination > Interpretation
-  Ureteral Stones Smith's General Urology > Chapter 8. Percutaneous Endourology & Ureterorenoscopy > Ureterorenoscopy
-  Ureteral Stones CURRENT Medical Dx & Tx > Chapter 23. Urologic Disorders > Genitourinary Tract Infections > Urinary Stone Disease > Surgical Treatment
-  Ureteral Stones Smith's General Urology > Chapter 27. Neuropathic Bladder Disorders > Abnormal Vesical Function > Complications of Neuropathic Bladder > Calculus
-  Fig. 40-10. Hydronephrosis and ureteral calculus. A. Left... Schwartz's Principles of Surgery > Chapter 40. Urology > Upper Urinary Tract Obstruction
-  8-6. What is the most likely diagnosis in Case 8-6 (Figure 8-12)? Basic Radiology, 2e > Chapter 8. Plain Film of the Abdomen > Exercises 8-2. Pelvic Calcifications

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 9-8. What is the most likely diagnosis for the patient in Case 9-8 (Figure 9-25)? Basic Radiology, 2e > Chapter 9. Radiology of the Urinary Tract > Exercise 9-3. Stone Disease
- 
 Balloon dilators can be used to ease passage of ureteroscopes (rigid or flexible; see Chapter 8)... Smith's General Urology > Chapter 10. Retrograde Instrumentation of the Urinary Tract > Ureteral Catheterization
- 
 Figure 11–7.. Changes in bladder, ureters, and kidneys caused by obstruction. A:... Smith's General Urology > Chapter 11. Urinary Obstruction & Stasis > Clinical Findings > X-Ray Findings (Figure 11–7)
- 
 Figure 6–25.. Sonography with comparative study. Film from IVP (left) and... Smith's General Urology > Chapter 6. Radiology of the Urinary Tract > Sonography
- 
 Ureteral calculi are always a consideration in patients with hematuria. About 50% of urinary... Basic Radiology, 2e > Chapter 8. Plain Film of the Abdomen > Exercises 8-2. Pelvic Calcifications > Discussion
- 
 Figure 65-1. Plate A is a plain x-ray showing a large, right ureteral stone (red arrow) somewhat... The Color Atlas of Family Medicine > Chapter 65. Kidney Stones > Patient Story
- 
 Figure 66-2. Large irregular calcification (arrow) representing ureterolithiasis in the left side... The Color Atlas of Family Medicine > Chapter 66. Hydronephrosis > Diagnosis > Imaging