Current Clinical Urology

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Ureteroscopy

Indications, Instrumentation & Technique

Humana Press

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To my family: Mary, Nate, Miles, Natalie, and Yogi.

Foreword

Ureteroscopy has become an important, universally accepted part of urologic endoscopy. It has grown from an interesting niche procedure to access the distal ureter into a standard procedure offering access throughout the upper urinary tract for visualization and also active interventional procedures. No longer are distal stones the only application. These have grown to include lateralizing hematuria, neoplasms, and obstructions. Even the application for stones has expanded to include larger calculi including full-branched staghorn stones.

The time has come for a current text on ureteroscopy to summarize the development, the applications, and the present status of the procedure. I am happy to be a part of this effort, which includes authors who are first-, second-, and even fourth-generation endourologists.

Ureteroscopy is impossible without the appropriate instruments. The devices continue to evolve in relation to the need, usually resulting in an improvement in performance. It is in these areas that the laser has found its place in urology. The Holmium laser has become indispensable for many therapeutic interventions.

As indications increase for ureteroscopy in more complex situations, the "tips and tricks" of the procedure become even more important. Although all urologists are now familiar with and, probably, perform ureteroscopy, it is always possible to do it better. The sections on technique and complex cases address these issues.

The need for further development is clear. Unlike the rigid cystoscope, which has had only refinements over decades, the ureteroscopes continue to evolve. Many changes can be anticipated, while others may be surprises. All changes are limited by the anatomy of the upper urinary tract and the diseases to be treated.

This volume attempts to define the history of the procedure, the present status of ureteroscopy, and the potential for future development.

Philadelphia, PA, USA — Demetrius H. Bagley, MD, FACS

Preface

Urologists are progressive surgeons, with innovative and inquisitive minds that drive the development of new approaches to traditional challenges. Ureteroscopy has developed in this nurturing environment, since its early inception in the late 1970s to its current position as a mainstay in the armamentarium of minimally invasive approaches to the upper urinary tract. These advances have lead to improved outcomes and decreased surgical morbidity.

The keys to any successful surgical procedure are selecting the right patient, setting the right expectations by appropriate patient counseling and consent, ensuring the availability of the necessary instrumentation, and using a precise and thoughtful technique. Nowhere are these keys more critical than in the delicate maneuvering of a ureteroscope.

Our goal is to provide all urologists with the evidence base one uses to make decisions regarding patient selection and to counsel patients on the risks and benefits of the procedure. Details on instrumentation and technique will be provided from many authors with varying preferences and techniques, such that the reader will be able to glean those "pearls" that will help them the most in their operating room. Lastly, we glimpse to the future, beyond those great strides that have been accomplished to what lies ahead that will help keep urologists at the forefront of endoscopic innovation.

Cleveland, OH, USA — Manoj Monga, MD

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