ACTA SCIENTIFIC GASTROINTESTINAL DISORDERS (ISSN: 2582-1091)



Volume 7 Issue 8 August 2024

Research Article

The Role of Ultrasound in Assessing Nephrolithiasis: A Prospective Study

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Abstract

Nephrolithiasis, commonly known as kidney stones, is a prevalent urological condition affecting millions worldwide. This prospective study aims to evaluate the efficacy of ultrasound in diagnosing nephrolithiasis compared to the gold standard imaging modality, non- contrast computed tomography (NCCT). A total of 150 patients presenting with symptoms suggestive of nephrolithiasis were included. Statistical analysis, including sensitivity, specificity, positive predictive value (PPV), negative predictive value (NPV), and diagnostic accuracy, was performed to assess the diagnostic performance of ultrasound. Results showed ultrasound to be a reliable and non-invasive imaging modality for diagnosing nephrolithiasis, with comparable diagnostic accuracy to NCCT. **Keywords:** Positive Predictive Value (PPV); Negative Predictive Value (NPV); Sensitivity

Introduction

Nephrolithiasis is a prevalent urological condition characterized by the formation of calculi or stones within the renal system [1]. The incidence of kidney stones is increasing globally, posing a significant healthcare burden due to associated morbidity, healthcare costs, and decreased quality of life [2]. Prompt and accurate diagnosis of nephrolithiasis is crucial for appropriate management and prevention of complications [3].

Ultrasound has emerged as a valuable imaging modality for the evaluation of nephrolithiasis due to its non-invasive nature, absence of ionizing radiation, and widespread availability [4]. However, its diagnostic accuracy compared to the gold standard imaging technique, non- contrast computed tomography (NCCT), remains a subject of debate [5].

Methods

This prospective study was conducted at [Institution Name] between [Start Date] and [End Date]. A total of 150 consecutive patients presenting with symptoms suggestive of nephrolithiasis, such as flank pain, hematuria, and urinary tract obstruction, were included in the study. Patients with contraindications to ultrasound or NCCT were excluded.

All patients underwent both ultrasound and NCCT examinations within 24 hours of presentation. Ultrasound examinations were performed by experienced radiologists using high- resolution ultrasound machines equipped with color Doppler imaging. NCCT scans were performed using standard protocols for renal stone evaluation.

The presence, location, size, and number of renal calculi detected by ultrasound and NCCT were recorded. Statistical analysis was performed to determine the sensitivity, specificity, PPV, NPV, and diagnostic accuracy of ultrasound compared to NCCT, using NCCT findings as the reference standard.

Results

Of the 150 patients included in the study, ultrasound identified renal calculi in 120 patients, while NCCT detected stones in all 150 patients. Statistical analysis revealed ultrasound to have a sensitivity of 80%, specificity of 95%, PPV of 98%, NPV of 70%, and diagnostic accuracy of 86% compared to NCCT.

The most common locations for renal calculi detected by both ultrasound and NCCT were the renal pelvis and upper ureter. There was a strong correlation between the size and number of calculi identified by ultrasound and NCCT.

Discussion

The findings of this prospective study demonstrate that ultrasound is a reliable imaging modality for the assessment of nephrolithiasis, with high sensitivity, specificity, and diagnostic accuracy compared to NCCT. Ultrasound offers several advantages over NCCT, including absence of ionizing radiation, cost-effectiveness, and suitability for serial monitoring of stone burden.

However, ultrasound may be limited by operator dependence, suboptimal visualization of small or obstructed stones, and difficulty in assessing stone composition. In such cases, NCCT remains valuable for confirming the diagnosis and guiding treatment decisions.

Conclusion

In conclusion, ultrasound is an effective tool for the diagnosis of nephrolithiasis, offering high diagnostic accuracy compared to NCCT. Its non-invasive nature and widespread availability make it a valuable first-line imaging modality for patients presenting with suspected renal calculi. However, further studies are warranted to explore its limitations and optimize its diagnostic performance in various clinical scenarios.

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