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### Early experience of PCNL at the Department of Urology and Renal Transplantation, Rawalpindi Medical College, Rawalpindi, Pakistan

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**Objective:** To share an early experience of Percutaneous Nephrolithotomy (PCNL) procedures performed at our department.

**Patients and Methods:** Study includes 21 patients aged 16 to 70 (mean 35.5) years, with 12 females and 9 males. Patients were diagnosed by Ultrasonography KUB and X-Ray IVU. Out of 21, nine patients had left and eight had right sided renal stones while four patients had bilateral renal stones in whom the symptomatic side was operated upon. Stone size ranged from 1.3 to 2.7 cm. The procedure was carried out under general anesthesia with cystoscopy and retrograde ureteric catheterization in all the patients followed by complete prone/supine positioning, calyceal puncture and tract dilatation under fluoroscopic guidance. Tract dilatation was followed by nephroscopy, stone disintegration using pneumatic lithoclast, and stone retrieval using stone forceps. A tube-less PCNL was done in 5 cases, antegrade DJ-Stenting was done in 3 while a nephrostomy tube was placed in 8 cases after stone retrieval. The intra-operative and postoperative surgical outcomes and any of the complications were evaluated.

**Results:** Twenty-one patients who had PCNL from December 2013 to August 2014 were reviewed. Complete stone clearance was observed in 11 cases (52.3%). Residual stone fragments were observed in 5 (23.80%) ranging 3mm to 1.6cm in size. Five patients had a failed access. The overall complication rate reported was 4.76%, the only complication included urosepsis managed conservatively in one patient only.

**Conclusions:** The study revealed a good success rate with minimal acceptable complications. Based on our early experience, it is believed that PCNL is a minimally invasive, effective and safe modality for the management of renal stones and should be considered as the first line surgical option when indicated.