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Scaricare Gratis Ricami A Macchina Husqvarna 18

This book presents the latest thinking on the clinical aspects of urinary calculi. Research findings, including literature-based evidence, indicate that people with calculi are more likely to become stone formers than people without stones. In 2010, nephrologists from the National Institute for Health and Clinical Excellence (NICE) studied the evidence to establish whether the benefits of treating symptomatic stone disease outweigh the risks for patients with a single kidney. Many studies have investigated the occurrence and cause of recurrent calculi in the primary stone formers. They also reviewed the evidence for treating people with a single kidney. The studies found that in people with a single kidney, the benefits of treating the primary stone do not appear to outweigh the harms of treating the stone. There are two aspects to this recommendation - firstly, in people with a single kidney, the benefits of treating the primary stone do not appear to outweigh the harms of treating the stone. A recent systematic review has not found any studies which have assessed the benefits of stone treatment for people with a single kidney. In order to assess this recommendation, we would need a study evaluating whether the benefits of treatment for primary stone disease outweigh the harms in people with a single kidney. In view of the lack of studies for treatment of primary stone disease, the panel instead considers the harms of treating primary stone disease in people with a single kidney and the benefits of treating primary stone disease in those with two kidneys. The benefits of treating stone disease in people with two kidneys are potentially significant. They include avoiding the long-term risks of surgery and infection. The benefits of routine treatment of primary stone disease in people with a single kidney are minimal. People with a single kidney are at an increased risk of recurrent urolithiasis. Nephrologists regard prevention of recurrent kidney stones (whether or not stone treatment is needed) to be a priority. Therefore, the panel recommends that people

with a single kidney should be monitored for recurrent kidney stones. This is particularly important for younger people and for those with multiple stones. Clinicians should warn patients that the risks of stone treatment far outweigh any benefits in people with a single kidney. Fig. 56.1 The value of prophylactic procedures for prevention of recurrence should be reassessed in people with a single kidney First published in The BMJ (Volume 333, 2 August 2010), Pages 239–243 Very few studies have evaluated long-term outcomes 6d1f23a050

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