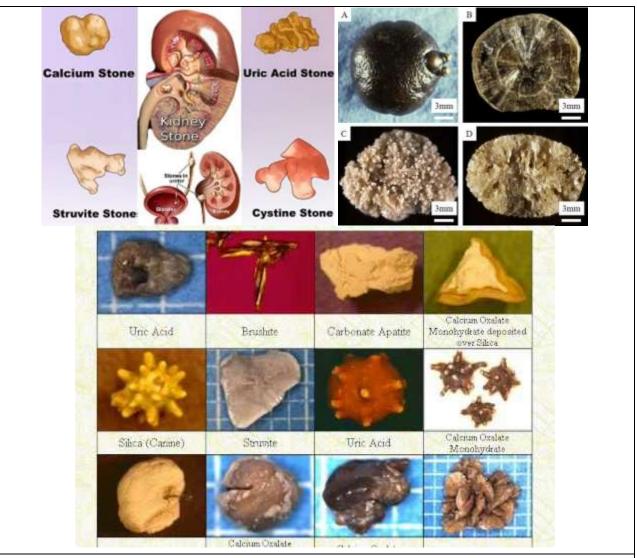
357 XIX. Diseases of the Urinary System

Renal Calculus (oxalate stone)			
Kidney:	Evidence of pyonephrosis:		
	Atrophied renal tissue		
	Dilated calyces and pelvis		
	Suppurative lining		
	Shows a calculus		
	The calculus:	• Single	
		Moderately-large ·	
		Mulberry in appearance,	
		Spiny or/and mamillated	
		Prickly external surface	
		Laminated cut surface (but not so well-defined)	
		Dark reddish-brown (blood-stained)	
		Hard in consistence	
NR·			

- Oxalate stone is a common renal calculus which is characterized by colicky pains and haematuria.
- Occasionally, it is part of a condition called "oxalosis" which is due to disturbance in oxalate metabolism so that calcium oxalate is deposited in the kidney and some other tissues.

Urolithiasis Calculi:		
Three calculi are seen		
1. Uric acid calculus:		Moderate in size
		Light-to-dark brown in colour
Cut surface:		Shows characteristic lamination around a central nucleus
		Wavy concentric rings
Consistence:	Alberta	Moderately-hard
2. Oxalate calculus:		
External surface:		Nodular
		Prickly, irregular outline
	37	 Dark brown in colour altered blood pigment)
Consistence:	A	Very hard
3. Phosphatic calculus:	Manager Control	Moderate in size
External surface:		Smooth
Cut surface:		White and chalky
Consistence:		Soft and friable



N.B.:

- Common sites of urinary stones are the renal pelvis, ureter and urinary bladder; a stone formed in the kidney may remain in it or may pass down into the bladder.
- Stones may be single, multiple or coralline.
- Clinically, colicky pains (violent spasmodic contractions of ureter) during stone-passage and haematuria.

Other type of rare stones



