

Urinary stone encrusted in the urethral meatus

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A 54-year-old woman, with no personal or family medical history of interest, visited the Emergency Department with dysuria, urgency, stranguria, hematuria of 12 hours evolution and the sensation of a foreign body in the vulva. Physical examination revealed a yellowish mass of stony consistency in the urethral meatus, with no other noteworthy signs. The mass was removed using forceps; it corresponded to a urinary stone measuring 2 x 0.8 x 0.8, composed of calcium oxalate and triple phosphate (Figure 1). Subsequent nephro-urological ultrasound showed stone formation in the left pelvic kidney. Urethral meatus lithiasis is an unusual finding in medical practice, especially if it is primary. It is much less

common in women because of the shortness of the female urethra and women have a the lower incidence of bladder stones. They can be associated anatomical abnormalities secondary to post-operative changes, foreign bodies, infection, diverticula, etc.. Most patients present acute urinary retention accompanied by perineal pain. Urgent drainage of the urinary tract is necessary to relieve symptoms. Most (75%) stones are of calcium: calcium oxalate, calcium phosphate and hydroxyapatite.

Of all calculi of the urethra, 10% are detected in the navicular fossa, classified as primary when formed in the urethra and secondary when coming formed in the kidney or bladder.



Figure 1. Stone encrusted in the urethral meatus (left) and extracted with forceps (right).

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