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Clinical nephrological problems important to the urologist

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Introduction

The renal physician and urologist should be in frequent contact, for many of their patients have clinical problems that embrace both specialities. For the renal physician the discovery that a patient's renal failure arises from urinary tract obstruction (if more than just urethral obstruction) will lead to an urgent request for assistance from the urologist. For the urologist, requests for assistance can be no less urgent. Patients in hospital for urinary tract surgery are at risk of urinary tract sepsis and when this happens loss of renal function can

arises from renal arterial disease (pre-renal) or obstruction in the lower urinary tract (post-renal). Some predominantly renal conditions are typically associated with little if any proteinuria, e.g. interstitial nephritis, reflux nephropathy, adult polycystic kidney disease and congenital anatomical disorders

In the tropics, as in many developed countries, it is likely that diabetes mellitus is a leading cause of chronic renal failure; it is also likely that uncontrolled/untreated hypertension is an important cause. Other important causes are chronic glomerulonephritis, schistosomiasis, renal tuberculosis, reflux nephropathy and the sickle-