



Biochemistry

Kidney Stones

When life puts
you in tough
situations, don't
say WHY ME
Say TRY ME ..

Revised by

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- **Important.**
- Doctors notes.
- Doctors slides.



OBJECTIVES:

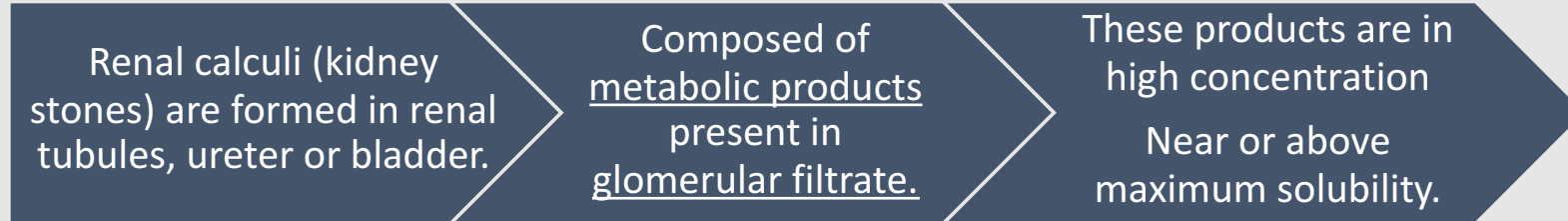
By the end of this lecture the students will be able to:

- Discuss the general physiological and pathological factors that favor kidney stones formation.
- List the types of kidney stones, their chemical constituents and characteristics.
- Identify the etiological causes of each type of kidney stone.
- Discuss the diagnosis, treatment and prevention of kidney stones

Kidney Stones



What are kidney stones ?



الماكسيوم سوليبيليتي ممكن
نشبهها بكأس الماء إذا ذوبنا فيه
كمية كبيرة من الملح، بحيث الملح
راح يذوب
حتى يوصل درجة معينة يصير
فيها يتراكم ولا يذوب ، لأن الماء
تشبع منه .

In which conditions do they form ?



Some drugs and bacteria causes the changes in urine PH ..

If we have a glass of water and we kept adding salt (sodium) to it. The water will reach a limit which cannot accept any salt and accumulate at the bottom of the glass.

Conditions Causing Kidney Stone Formation

1. High concentration of metabolic products in glomerular filtrate is due to

Low urinary volume (with normal renal function) due to restricted fluid intake
Increased fluid loss from the body due to excessive sweating or diuretics

Increased excretion of metabolic products forming stones.
(urinary system is exposed to more metabolites)

High plasma volume (high filtrate level) Filtration increases thus metabolite amount in filtrate increase too .

Low tubular reabsorption from filtrate .

(urine will more concentrated)

2. Changes in urine pH due to

Bacterial infection

It could be acid or base depending on the type of bacteria

Precipitation of salts at different pH.

3. Urinary stagnation is due to

Obstruction of urinary flow.

- If urine PH has changed, some substances become insoluble because certain substances are soluble at certain Ph.

We should determine the Ph of the urine for treatment:

1. Acidification
2. alkalization

Conditions Causing Kidney Stone Formation

4. Deficiency of stone-forming inhibitors

Urine contains substances that function to protect the possibility of pathological calcification in tubular fluid and urine

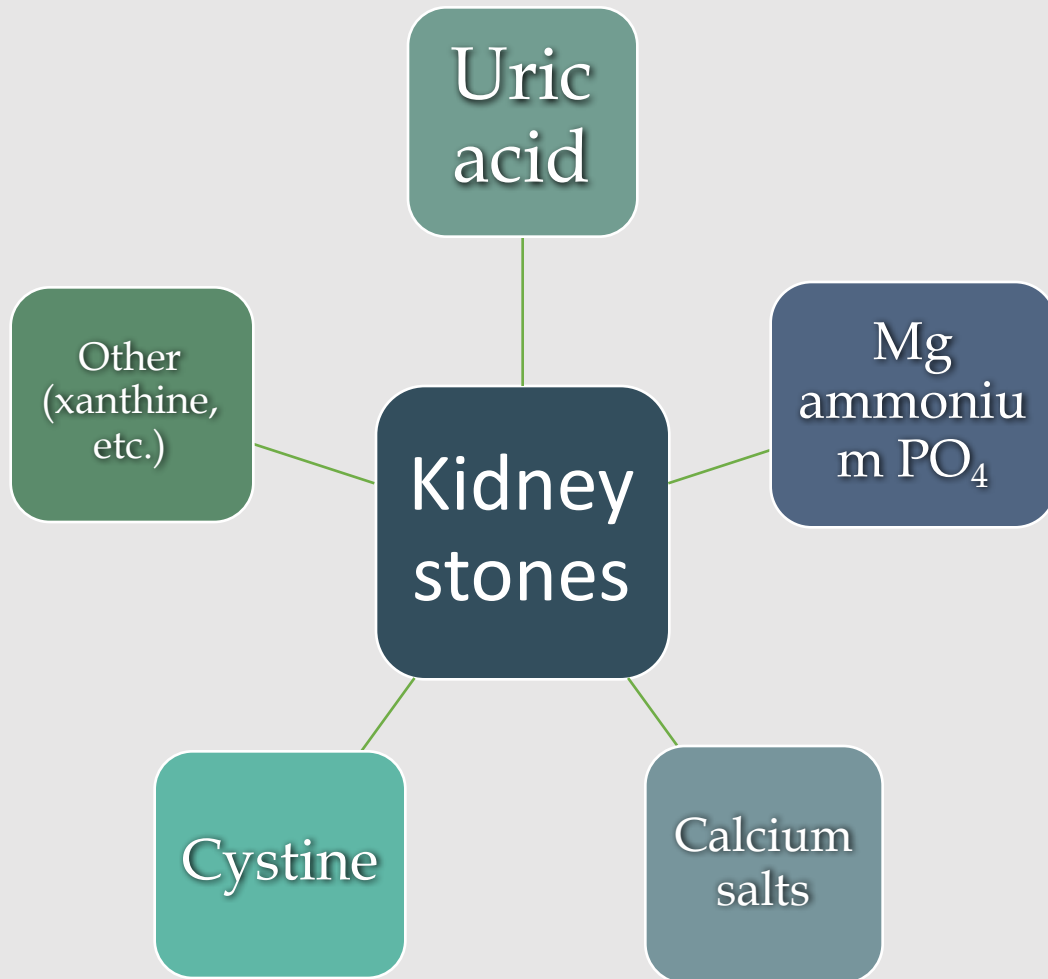
Citrate, pyrophosphate, glycoproteins **inhibit** growth of calcium phosphate and calcium oxalate crystals .

In type I renal tubular acidosis, hypocitraturia leads to renal stones.

hypocitraturia is citrate excretion of less than a certain amount per day..



Types Of Kidney Stones

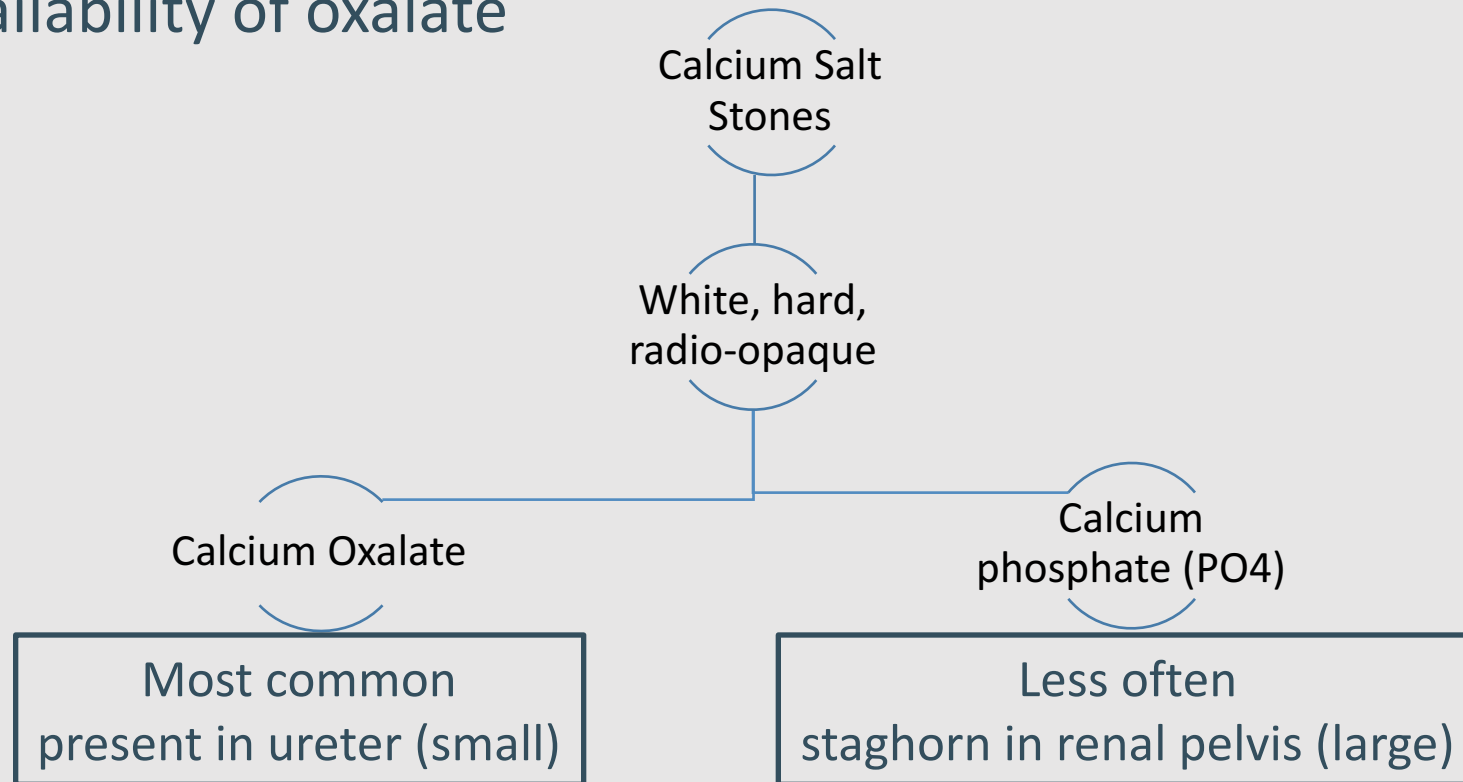


TYPE	PH level at which stones are formed	Appearance on X-ray
Calcium salts Need high pH to form stones	Alkaline urine	radio-opaque
Uric acid Need low pH to form stones	Acidic urine	Radio-lucent
Mg Ammonium Po4 Need high pH to form stones	Alkaline urine	Faint radio-opaque
Cystine Need low pH to form stones	Acidic urine	Faint radio-opaque
Xanthine Need low pH to form stones	Acidic urine	Radio-lucent

Calcium Salt Stones

- ✓ 80% of kidney stones contain calcium
- ✓ The type of salt depends on:
 1. Urine PH
 2. Availability of oxalate

- Most common type.
- Ca is a cation, so it combines with an anion (e.g. oxalate, phosphate) to form salts.



CAUSES OF CALCIUM SALT STONES

Hyperoxaluria

- Also known as secondary hyperoxaluria.
- ❖ **Causes:**
 - the formation of calcium oxalates with or without hypercalciuria.

Oxalate and calcium are highly attractive. The two bind together rapidly even without Hypercalciuria.

- Increased oxalate absorption in fat malabsorption.
- **Occurs due to:** diet rich in oxalates (e.g. tomatoes).

Hypercalciuria

- Increased urinary calcium excretion.
 - **Men:** > 7.5 mmols/day
 - **Women** > 6.2 mmols/day
 - May or may **not** be due to hypercalcemia (**often due to primary hyperparathyroidism**)
 - **Sometimes, Ca⁺⁺ salts stones are found with no hypercalcemia.** but they are commonly found together
- Hypercalciuria can occur due to increased bone resorption without Hypercalcemia.

Primary hyperoxaluria

- **Due to** inborn errors.
- **Urinary oxalate excretion:** > 400 μ mol/day

This disease causes inability to metabolize oxalate, increasing its concentration in the serum.

Secondary is exogenous: from diet

Fat malabsorption results in fat reaching the colon. This fat will bind to calcium (which is usually binds to oxalate and get excreted in stool) releasing free oxalate which ultimately will be reabsorbed into the blood. Therefore, increasing oxalate in the blood.

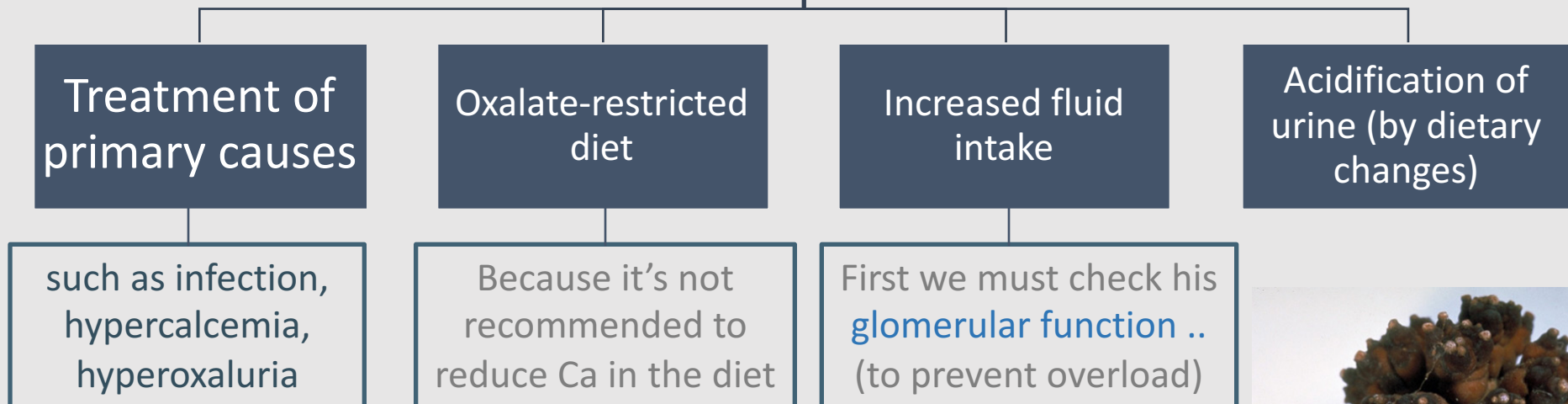


Calcium Salt Stones

❖ Calcium salt stones are formed in **alkaline urine**



Treatment



قرن الأيل Staghorn



Uric Acid Stones



- ❖ Represent about 8% of renal stones contain uric acid
- ❖ May be associated with hyperuricemia (**with or without clinical gout**)
- ❖ Form in **acidic urine** (Unlike calcium stones)

General Appearance

Small,
friable,
yellowish

May form
staghorn (If
it was big)

Radiolucent
(plain x-rays
cannot
detect)

Visualized by
ultrasound
or I.V
pyelogram

Treatment

Purine-
restricted
diet

Increase
fluid intake

Alkalinization
of urine (by
dietary
changes)

Treat the
cause of
hyperuricemia

Because it's the origin of
Uric acid

Mg Ammonium PO₄ Stones

- ❖ Represent about 10% of all renal stones contain Mg amm. PO₄
- ❖ Also called **struvite** kidney stones
- ❖ 75% of staghorn stones are of struvite type
- ❖ Commonly associated with **chronic and upper urinary tract infection** and **staghorn calculi**.



Mg ammonium PO₄ is kind of mineral that naturally found in the earth. Its geological name is “struvite”

Treatment

Treatment of infection

Urine acidification

Increase fluid intake

In some cases, it may require complete stone removal (percutaneous nephrolithotomy)

Chronic urinary tract infection

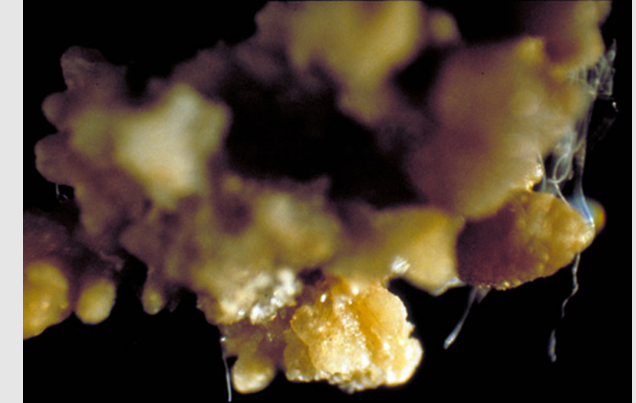
Caused by Microorganisms (such as from **Proteus genus**) that has urase activity which metabolizes urea into ammonia.

Causing urine pH to become **alkaline** leading to stone formation

- Infection is prime factor to struvite stones
- Bacterial infection leads to 2 things:
 1. Urease activity
 2. Change to alkaline pHThese two are the factors leading to Mg stone formations.

Cystine Stones

- ❖ A rare type of kidney stone.
- ❖ Due to homozygous cystinuria.
(Inborn error of amino acid metabolism; It might be genetic)
- ❖ Form in acidic urine.
- ❖ Soluble in alkaline urine.
- ❖ Faint radio-opaque.

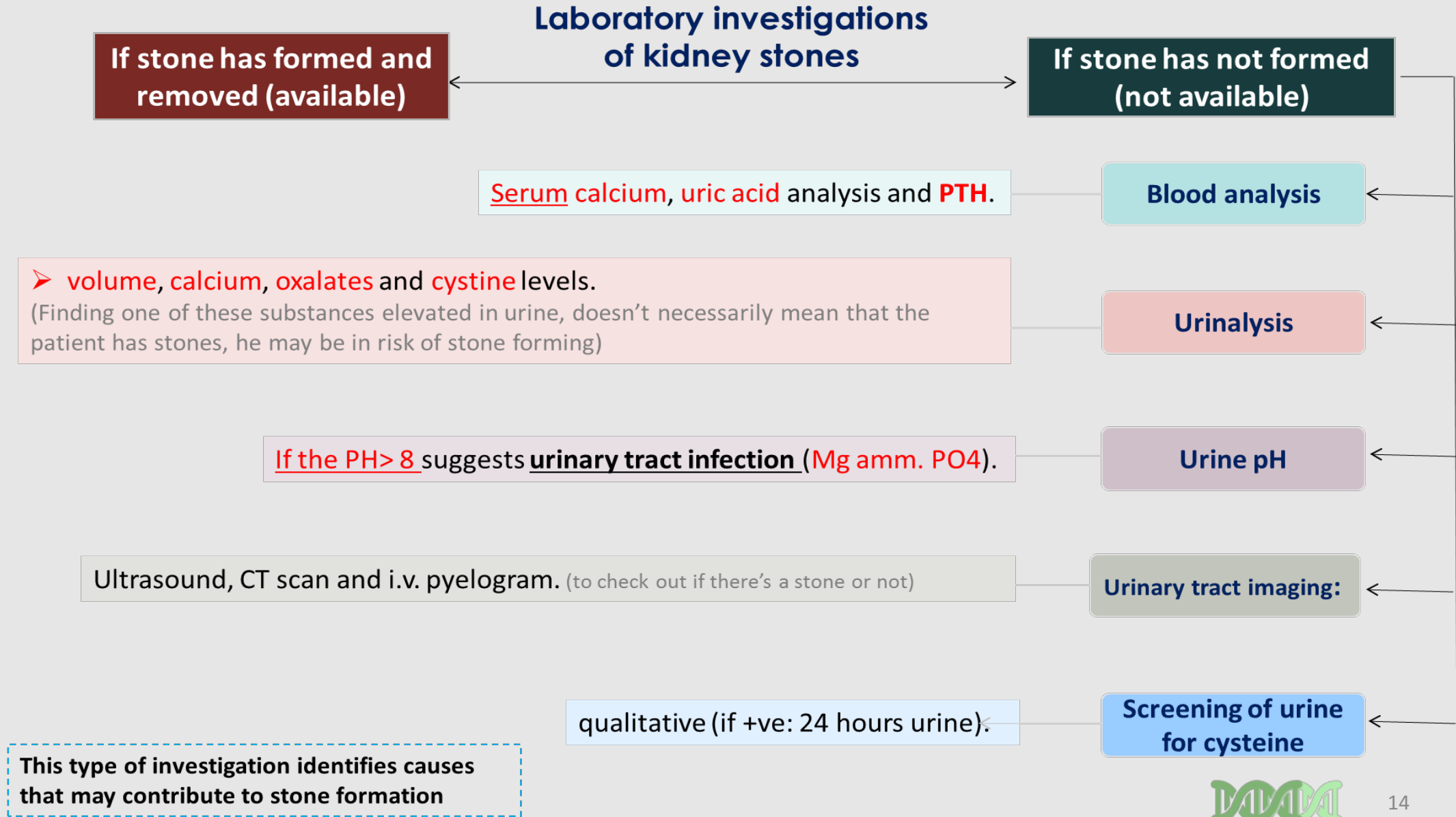


Treatment

- ✓ Increased fluid intake
- ✓ Alkalization of urine (by dietary changes)
- ✓ **Penicillamine** (binds to cysteine to form a compound more soluble than cysteine)

Cystine doesn't exist normally in our body, it is formed due to oxidization of two cysteine (amino acid) molecules leading to formation of the insoluble cystine molecules which will eventually lead to cystine stones formation (important to understand treatment only)

Laboratory Investigations Of Kidney Stones



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THANK YOU
PLEASE CONTACT US IF
YOU HAVE ANY ISSUE



- Review the notes



- Lippincott's Illustrated Reviews: Biochemistry, 6th E



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