



Supine PCNL

Renal stone has affected human throughout history with a description of surgery to remove them dating from as early as 600 BCE in ancient India. There are several modalities to treat renal stone. Supine Percutaneous Nephrolithotomy (PCNL) is one of them which is gaining attention due to its potential advantages and emerging as a noteworthy approach in urological procedures¹.

The supine position in PCNL offers distinct advantages. It provides improved access to the kidney, attributing this benefit to the more direct route given by the supine position. This anatomical alignment facilitates a streamlined approach to the renal collecting system, potentially simplifying the surgical procedure².

Enhanced stone visualization is a critical factor in the success of PCNL. Supine PCNL exhibited superior stone clearance rates compared to the traditional prone position. The clearer line of sight to stones in the supine position contributes to more accurate targeting and removal, reducing the likelihood of leaving residual fragments³.

Patient comfort and cooperation are vital considerations in any surgical setting. Patients undergoing supine PCNL have higher levels of comfort and reduced anxiety compared to those in the prone position. Improved patient satisfaction and cooperation during surgery can positively impact outcomes and recovery⁴.

Position related circulatory and ventilator difficulties are more common in prone PCNL than supine PCNL⁵. Surgeons can perform PCNL and ureteroscopic procedure simultaneously in supine PCNL⁶.

However, challenges exist in adopting supine PCNL, necessitating ongoing education and training. Continued training programs are essential to ensure successful implementation and widespread acceptance of this technique⁷.

In conclusion, supine PCNL has demonstrated significant advantages in terms of improved access,

enhanced stone visualization, and increased patient comfort. It is evident that the supine position holds promise as a valuable alternative in the evolving landscape of urological surgeries.

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