

EPIDEMIOLOGY OF URINARY STONES IN ITALY AND EUROPE

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Urolithiasis may be considered a chronic disease owing to the high recurrence rate and because it is frequently aggravated by congenital or acquired metabolic deficiencies. Therefore it is correctly estimated by the prevalence rate, that is the number of cases of the disease in a given population and includes all the patients who have experienced at least one episode of urolithiasis in their lives.

Measurement of the prevalence rate is carried out on randomised samples of the general population and tends to increase as a function of the age of the population, in proportion as the number of cases increases.

In the course of the last 100 years, there has been a gradual increase in the prevalence of reno-ureteral stone disease, typical of adult age and featuring mainly calcium oxalate.

Endemic infantile vesical calculosis, due to malnutrition with calculi composed of ammonium urate and calcium oxalate, is still present in some areas of undeveloped countries but its prevalence is decreasing in proportion as social conditions gradually improve.

The general prevalence rate range 1-15%. The potential risk factors for stone formation are both genetic and environmental (climate, diet, life-style and working activity).

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