

Regarding Distal Urinary Stones and Oral Sex Intercourse

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1. SUMMARY

The urolithiasis is a very common disorder in the daily activity that could be treated with medical expulsive therapy or endoscopically. Herein we report a singular case of stone emission during oral sex intercourse. A 30-year-old male referred to our Emergency Department (ED) with right renal colic pain. We decided for home observation and expulsive medical therapy, but after few hours the patient came back to ED, with his girlfriend, scared by the emission a 5 mm rough stone with blood, directly in her mouth, during an oral sex intercourse. We suggest that the oral sex, before a complete sexual intercourse, could promote a peak of nitric oxide (NO) production with a sudden relaxation of the distal ureteral smooth muscle and the consensual emission of the stone.

2. CASE REPORT

The urolithiasis is a common disorder and in the scientific literature we found any articles about a

role for sexual intercourse as an alternative therapeutic option. (1) Herein we present the case of a 30-year-old male who referred to our Emergency Department (ED) with a complaint suggestive for right renal colic pain. The anamnesis was positive for urolithiasis. He did not take any drugs at home. The vital parameters were normal. Laboratory investigations were negative. Ultrasound scan (US) examination showed a right hydronephrosis, with absence of stones in the explorable stretch. (FIG. 1) We treated the pain with paracetamol 1 g i.v. and diclofenac 75 mg i.m. with a complete relief of the symptomatology. We decided for home observation and expulsive medical therapy with tamsulosin 0.4 mg/day and prednisone 25 mg/day. After few hours the patient came back to ED, with his girlfriend, scared by the emission a 5 mm rough stone with blood, directly in her mouth, during an oral sex intercourse on the boat! He had a complete resolution of the symptoms.



Figure 1. The ultrasonography of the right kidney shows hydronephrosis

3. DISCUSSION

As suggested by scientific literature, a distal ureteral stone, depending by its localization and size, could pass spontaneously in 50-95% of cases. (1) The first approach usually is a medical expulsive therapy (MET), using alpha-blockers, corticosteroids calcium channel blockers and recently phosphodiesterase type 5 (PDE5) inhibitors. Anyway, the drugs appear effective for distal ureteral stones up to 5 mm in size. (2) The nitric oxide synthase (NOS) and PDE5 are very important for the erectile process and in smooth muscle ureteral relaxation. NOS increases cyclic guanosine monophosphate (cGMP) levels, while PDE5 reduces it, while testosterone positively controls the penile erection. The testosterone timely adjusts the erectile process as a function of sexual desire, therefore finalizing erections to sex. (1) The efficacy of the sexual intercourse, 3 or 4 times per week, is now consolidated in literature with a better outcome versus placebo in the efficacy of treatment of distal ureteral calculi and an optimal pain control. (2)

The underlying pathophysiological mechanism is the release of nitric oxide (NO) in the cavernous tissues and in the distal part of the ureter, with the consensual relaxation of the smooth muscle of the ureter and bladder. NO is released directly from the endothelium and from the nerve endings of nitrergic fibers. (3)

4. CONCLUSION

In the literature we found only about the general “sex intercourse”, while there is no evidence of the effectiveness of a particular sexual practice compared to another. In example, there is no evidence that the masturbation or the oral sex could ameliorate the ureteral peristalsis versus the general sexual intercourse. (3)

Herein we hypothesize that MET in synergy with oral sex could have stimulated an increase in NO with the consensual release of smooth muscle and stone emission in the bladder and therefore in the urethra. The oral sex, before a complete sexual intercourse, could cause a peak of NO production with a sudden relaxation of the distal ureteral smooth muscle.

And what about the boat? We believe that the boat has contributed to relaxation!

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