

Nutrients, vitamins, probiotics and herbal products: an update of their role in urolithogenesis

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Abstract

Nutrients, vitamins, probiotics, and herbal products may be risk factors, or alternately, protect against the formation of urinary stones. The purpose of this review was to update knowledge of the role of nutraceuticals in renal stone formation. A systematic search of the relevant literature published in PubMed in the last ten years was conducted and a narrative review of the data from the included studies was done. Search screened 513 studies that were reduced to 34 after evaluation by title and abstract; other 38 studies were retrieved by references of the selected studies. Beverages high fluid intake confirmed protective effect; orange juice protective effect; apple or grapefruit juice not confirmed as risk factors; sugar-sweetened soda and punch increased risk of stone formation. Energy intake: very high energy intake increased risk factor for women (especially after menopause); dietary acid load increased risk at equal levels of energy intake. Macronutrients confirmed increased risk of high protein intake. Calcium and Oxalate: calcium intake protective effect; oxalate intake only modest increase of risk in men and older women. Metal cations zinc and iron intake no clear impact on the risk of stone formation, dietary copper increased risk; manganese intake reduced risk of stone formation. Fruits and Vegetables decreased risk. Vitamins B6 intake not associated to risk of stone formation; vitamin

C intake increased risk in men; vitamin D or supplemental vitamin D intake not associated to increased risk in men and younger women, suggestion of a higher risk in older women; Probiotics Gut colonization with *Oxalobacter formigenes* associated to lower risk of stone formation, effect of oxalate-degraders probiotics on urinary oxalate equivocal. Herbal products efficacy of some herbal products demonstrated in some trials, more investigations needed to confirm their efficacy and safety.

References

1. 1.

Curhan GC, Curhan SG (1994) Dietary factors and kidney stone formation. *Compr Ther* 20:485–489

[CAS](#) [PubMed](#) [Google Scholar](#)

2. 2.

Taylor EN, Curhan GC (2006) Diet and fluid prescription in stone disease. *Kidney Int* 70:835–839

[CAS](#) [PubMed](#) [Google Scholar](#)

3. 3.

Curhan GC, Willett WC, Rimm EB et al (1993) A prospective study of dietary calcium and other nutrients and the risk of symptomatic kidney stones. *N Engl J Med* 328:833–838

[CAS](#) [PubMed](#) [Google Scholar](#)

4. 4.

Curhan G, Willett W, Speizer F et al (1997) Comparison of dietary calcium with supplemental calcium and other nutrients as factors affecting the risk for kidney stones in women. *Ann Intern Med* 126:497–504

[CAS](#) [PubMed](#) [Google Scholar](#)

5. 5.

Curhan GC, Willett WC, Knight EL et al (2004) Dietary factors and the risk of incident kidney stones in younger women (Nurses' Health Study II). Arch Intern Med 164:885–891

[PubMed](#) [Google Scholar](#)

6. 6.

Borghi L, Meschi T, Amato F, Briganti A, Novarini A, Giannini A (1996) Urinary volume, water and recurrences in idiopathic calcium nephrolithiasis: a 5-year randomized prospective study. J Urol 155:839–844

[CAS](#) [PubMed](#) [Google Scholar](#)

7. 7.

Curhan GC, Willett WC, Rimm EB et al (1996) Prospective study of beverage use and the risk of kidney stones. Am J Epidemiol 143:240–247

[CAS](#) [PubMed](#) [Google Scholar](#)

8. 8.

Curhan GC, Willett WC, Speizer FE et al (1998) Beverage use and risk for kidney stones in women. Ann Intern Med 128:534–540

[CAS](#) [PubMed](#) [Google Scholar](#)

9. 9.

Shuster J, Jenkins A, Logan C, Barnett T, Riehle R, Zackson D, Wolfe H, Dale R, Daley M, Malik I et al (1992) Soft drink

consumption and urinary stone recurrence: a randomized prevention trial. *J Clin Epidemiol* 45:911–916

[CAS](#) [PubMed](#) [Google Scholar](#)

10.10.

Ferraro PM, Taylor EN, Gambaro G, Curhan GC (2013) Soda and other beverages and the risk of kidney stones. *Clin J Am Soc Nephrol* 8:1389–1395

[PubMed](#) [PubMed Central](#) [Google Scholar](#)

11. 11.

Wabner CL, Pak CY (1993) Effect of orange juice consumption on urinary stone risk factors. *J Urol* 149:1405–1408

[CAS](#) [PubMed](#) [Google Scholar](#)

12.12.

Odvin CV (2006) Comparative value of orange juice versus lemonade in reducing stone-forming risk. *Clin J Am Soc Nephrol* 1:1269–1274

[CAS](#) [PubMed](#) [Google Scholar](#)

13.13.

Shu X, Cai H, Xiang YB, Li H, Lipworth L, Miller NL, Zheng W, Shu XO, Hsi RS (2019) Green tea intake and risk of incident kidney stones: prospective cohort studies in middle-aged and elderly Chinese individuals. *Int J Urol* 26:241–246

[CAS](#) [PubMed](#) [Google Scholar](#)

14.14.

Chen HY, Wu JS, Chang YF, Sun ZJ, Chang CJ, Lu FH, Yang YC (2019) Increased amount and duration of tea consumption may be associated with decreased risk of renal stone disease. *World J Urol* 37:379–384

[PubMed](#) [Google Scholar](#)

15.15.

Curhan GC, Willett WC, Rimm EB, Speizer FE, Stampfer MJ (1998) Body size and risk of kidney stones. *J Am Soc Nephrol* 9:1645–1652

[CAS](#) [PubMed](#) [Google Scholar](#)

16.16.

West B, Luke A, Durazo-Arvizu RA, Cao G, Shoham D, Kramer H (2008) Metabolic syndrome and self-reported history of kidney stones: the National Health and Nutrition Examination Survey (NHANES III) 1988–94. *Am J Kidney Dis* 51:741–747

[PubMed](#) [Google Scholar](#)

17.17.

Rendina D, Mossetti G, De Filippo G, Benvenuto D, Vivona CL, Imbroinise A, Zampa G, Ricchio S, Strazzullo P (2009) Association between metabolic syndrome and nephrolithiasis in an inpatient population in southern Italy: role of gender, hypertension and abdominal obesity. *Nephrol Dial Transplant* 24:900–906

[PubMed](#) [Google Scholar](#)

18.18.

Jeong IG, Kang T, Bang JK, Park J, Kim W, Hwang SS (2011) Association between metabolic syndrome and the presence of kidney stones in a screened population. *Am J Kidney Dis* 58:383–388

[PubMed](#) [Google Scholar](#)

19.19.

Rendina D, De Filippo G, D'Elia L, Strazzullo P (2014) Metabolic syndrome and nephrolithiasis: a systematic review and meta-analysis of the scientific evidence. *J Nephrol* 27:371–376

[CAS](#) [PubMed](#) [Google Scholar](#)

20. 20.

Al Zahrani H, Norman RW, Thompson C, Weerasinghe S (2000) The dietary habits of idiopathic calcium stone-formers and normal control subjects. *BJU Int* 85:616–620

[CAS](#) [PubMed](#) [Google Scholar](#)

21.21.

Aune D, Mahamat-Saleh Y, Norat T, Riboli E (2018) Body fatness, diabetes, physical activity and risk of kidney stones: a systematic review and meta-analysis of cohort studies. *Eur J Epidemiol* 33:1033–1047

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

22. 22.

Sorensen MD, Chi T, Shara NM, Wang H, Hsi RS, Orchard T, Kahn AJ, Jackson RD, Miller J, Reiner AP, Stoller ML (2014) Activity, energy intake, obesity, and the risk of incident kidney stones in postmenopausal women: a report from the Women's Health Initiative. *J Am Soc Nephrol* 25:362–369

[PubMed](#) [Google Scholar](#)

23. 23.

Shu X, Cai H, Xiang YB, Li H, Lipworth L, Miller NL, Zheng W, Shu XO, Hsi RS (2017) Nephrolithiasis among middle aged and elderly urban Chinese: a report from prospective cohort studies in Shanghai. *J Endourol* 31:1327–1334

[PubMed](#) [PubMed Central](#) [Google Scholar](#)

24. 24.

Oda E (2014) Overweight and high-sensitivity C-reactive protein are weakly associated with kidney stone formation in Japanese men. *Int J Urol* 21:1005–1011

[CAS](#) [PubMed](#) [Google Scholar](#)

25. 25.

Yoshimura E, Sawada SS, Lee IM et al (2016) Body mass index and kidney stones: a cohort study of Japanese men. *J Epidemiol* 26:131–136

[PubMed](#) [Google Scholar](#)

26. 26.

Ferraro PM, Curhan GC, Sorensen MD, Gambaro G, Taylor EN (2015) Physical activity, energy intake and the risk of incident kidney stones. *J Urol* 193:864–868

[PubMed](#) [Google Scholar](#)

27.27.

Trinchieri A, Maletta A, Lizzano R, Marchesotti F (2013) Potential renal acid load and the risk of renal stone formation in a case-control study. *Eur J Clin Nutr* 67:1077–1080

[CAS](#) [PubMed](#) [Google Scholar](#)

28. 28.

Vezzoli G, Dogliotti E, Terranegra A, Arcidiacono T, Macrina L, Tavecchia M, Pivari F, Mingione A, Brasacchio C, Nouvenne A, Meschi T, Cusi D, Spotti D, Montanari E, Soldati L (2015) Dietary style and acid load in an Italian population of calcium kidney stone formers. *Nutr Metab Cardiovasc Dis* 25:588–593

[CAS](#) [PubMed](#) [Google Scholar](#)

29. 29.

Ferraro PM, Mandel EI, Curhan GC, Gambaro G, Taylor EN (2016) Dietary protein and potassium, diet-dependent net acid load, and risk of incident kidney stones. *Clin J Am Soc Nephrol* 11:1834–1844

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

30. 30.

Taylor EN, Fung TT, Curhan GC (2009) DASH-style diet associates with reduced risk for kidney stones. *J Am Soc Nephrol* 20:2253–2259

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

31.31.

Leone A, Fernández-Montero A, de la Fuente-Arrillaga C, Martínez-González MÁ, Bertoli S, Battezzati A, Bes-Rastrollo M (2017) Adherence to the Mediterranean dietary pattern and incidence of nephrolithiasis in the Seguimiento Universidad de Navarra follow-up (SUN) cohort. *Am J Kidney Dis* 70:778–786

[PubMed](#) [Google Scholar](#)

32. 32.

Siener R, Jansen B, Watzel B, Hesse A (2011) Effect of n-3 fatty acid supplementation on urinary risk factors for calcium oxalate stone formation. *J Urol* 185:719–724

[CAS](#) [PubMed](#) [Google Scholar](#)

33. 33.

Yasui T, Suzuki S, Itoh Y, Tozawa K, Tokudome S, Kohri K (2008) Eicosapentaenoic acid has a preventive effect on the recurrence of nephrolithiasis. *Urol Int* 81:135–138

[CAS](#) [PubMed](#) [Google Scholar](#)

34. 34.

Taylor EN, Stampfer MJ, Curhan GC (2005) Fatty acid intake and incident nephrolithiasis. *Am J Kidney Dis* 45:267–274

[CAS](#) [PubMed](#) [Google Scholar](#)

35. 35.

Ferraro PM, Taylor EN, Gambaro G, Curhan GC (2017) Dietary and lifestyle risk factors associated with incident kidney stones in men and women. *J Urol* 198:858–863

[PubMed](#) [PubMed Central](#) [Google Scholar](#)

36. 36.

Turney BW, Appleby PN, Reynard JM, Noble JG, Key TJ, Allen NE (2014) Diet and risk of kidney stones in the Oxford cohort of the European Prospective Investigation into Cancer and Nutrition (EPIC). *Eur J Epidemiol* 29:363–369

[CAS](#) [PubMed](#) [Google Scholar](#)

37.37.

Borghi L, Schianchi T, Meschi T, Guerra A, Allegri F, Maggiore U, Novarini A (2002) Comparison of two diets for the prevention of recurrent stones in idiopathic hypercalciuria. *N Engl J Med* 346:77–84

[CAS](#) [PubMed](#) [Google Scholar](#)

38. 38.

Taylor EN, Curhan GC (2007) Oxalate intake and the risk for nephrolithiasis. *J Am Soc Nephrol* 18:2198–2204

[CAS](#) [PubMed](#) [Google Scholar](#)

39. 39.

Taylor EN, Curhan GC (2013) Dietary calcium from dairy and nondairy sources, and risk of symptomatic kidney stones. *J Urol* 190:1255–1259

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

40. 40.

Taylor EN, Stampfer MJ, Curhan GC (2004) Dietary factors and the risk of incident kidney stones in men: new insights after 14 years of follow-up. *J Am Soc Nephrol* 15:3225–3232

[PubMed](#) [Google Scholar](#)

41.41.

Tang J, McFann K, Chonchol M (2012) Dietary zinc intake and kidney stone formation: evaluation of NHANES III. *Am J Nephrol* 36:549–553

[PubMed](#) [Google Scholar](#)

42. 42.

Thomas LD, Elinder CG, Tiselius HG, Wolk A, Akesson A (2013) Dietary cadmium exposure and kidney stone incidence: a population-based prospective cohort study of men & women. *Environ Int* 59:148–151

[CAS](#) [PubMed](#) [Google Scholar](#)

43. 43.

Ferraro PM, Bonello M, Frigo AC, D'Addressi A, Sturniolo A, Gambaro G (2011) Cadmium exposure and kidney stone formation in the general population—an analysis of the National Health and Nutrition Examination Survey III data. *J Endourol* 25:875–880

[PubMed](#) [Google Scholar](#)

44. 44.

Ferraro PM, Gambaro G, Curhan GC, Taylor EN (2018) Intake of trace metals and the risk of incident kidney stones. *J Urol* 199:1534–1539

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

45. 45.

Taylor EN, Curhan GC (2008) Fructose consumption and the risk of kidney stones. *Kidney Int* 73:207–212

[CAS](#) [PubMed](#) [Google Scholar](#)

46. 46.

Meschi T, Maggiore U, Fiaccadori E, Schianchi T, Bosi S, Adorni G, Ridolo E, Guerra A, Allegri F, Novarini A, Borghi L (2004) The effect of fruits and vegetables on urinary stone risk factors. *Kidney Int* 66:2402–2410

[CAS](#) [PubMed](#) [Google Scholar](#)

47. 47.

Sorensen MD, Hsi RS, Chi T, Shara N, Wactawski-Wende J, Kahn AJ, Wang H, Hou L, Stoller ML, *Women's Health*

Initiative Writing Group (2014) (2014) Dietary intake of fiber, fruit and vegetables decreases the risk of incident kidney stones in women: a Women's Health Initiative report. *J Urol* 192:1694–1699

[PubMed](#) [PubMed Central](#) [Google Scholar](#)

48. 48.

Ferraro PM, Curhan GC, Gambaro G, Taylor EN (2019) Antibiotic use and risk of incident kidney stones in female nurses. *Am J Kidney Dis* 74(6):736–741

[CAS](#) [PubMed](#) [Google Scholar](#)

49. 49.

Curhan GC, Willett WC, Rimm EB et al (1996) A prospective study of the intake of vitamins C and B6, and the risk of kidney stones in men. *J Urol* 155:1847–1851

[CAS](#) [PubMed](#) [Google Scholar](#)

50. 50.

Curhan GC, Willett WC, Speizer FE et al (1999) Intake of vitamins B6 and C and the risk of kidney stones in women. *J Am Soc Nephrol* 10:840–845

[CAS](#) [PubMed](#) [Google Scholar](#)

51.51.

Letavernier E, Daudon M (2018) Vitamin D, hypercalciuria and kidney stones. *Nutrients* 10:pii:E366

[Google Scholar](#)

52. 52.

Jackson RD, LaCroix AZ, Gass M, Wallace RB, Robbins J, Lewis CE, Bassford T, Beresford SA, Black HR, Blanchette P, Bonds DE, Brunner RL, Brzyski RG, Caan B, Cauley JA, Chlebowski RT, Cummings SR, Granek I, Hays J, Heiss G, Hendrix SL, Howard BV, Hsia J, Hubbell FA, Johnson KC, Judd H, Kotchen JM, Kuller LH, Langer RD, Lasser NL, Limacher MC, Ludlam S, Manson JE, Margolis KL, McGowan J, Ockene JK, O'Sullivan MJ, Phillips L, Prentice RL, Sarto GE, Stefanick ML, Van Horn L, Wactawski-Wende J, Whitlock E, Anderson GL, Assaf AR, Barad D, Investigators WHI (2006) Calcium plus vitamin D supplementation and the risk of fractures. *N Engl J Med* 354:669–683

[CAS](#) [PubMed](#) [Google Scholar](#)

53. 53.

Taylor EN, Stampfer MJ, Curhan GC (2004) Dietary factors and the risk of incident kidney stones in men: new insights after 14 years of follow-up. *J Am Soc Nephrol JASN* 15:3225–3232

[PubMed](#) [Google Scholar](#)

54. 54.

Ferraro PM, Taylor EN, Gambaro G, Curhan GC (2018) Vitamin B6 intake and the risk of incident kidney stones. *Urolithiasis* 46:265–270

[CAS](#) [PubMed](#) [Google Scholar](#)

55.55.

Ferraro PM, Curhan GC, Gambaro G, Taylor EN (2016) Total, dietary, and supplemental vitamin C intake and risk of incident kidney stones. *Am J Kidney Dis* 67:400–407

[CAS](#) [PubMed](#) [Google Scholar](#)

56. 56.

Lappe J, Watson P, Travers-Gustafson D, Recker R, Garland C, Gorham E, Baggerly K, McDonnell SL (2017) Effect of vitamin D and calcium supplementation on cancer incidence in older women: a randomized clinical trial. *JAMA* 317:1234–1243

[CAS](#) [PubMed](#) [Google Scholar](#)

57.57.

Wallace RB, Wactawski-Wende J, O'Sullivan MJ, Larson JC, Cochrane B, Gass M, Masaki K (2011) Urinary tract stone occurrence in the Women's Health Initiative (WHI) randomized clinical trial of calcium and vitamin D supplements. *Am J Clin Nutr* 94:270–277

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

58. 58.

Prentice RL, Pettinger MB, Jackson RD, Wactawski-Wende J, Lacroix AZ, Anderson GL, Chlebowski RT, Manson JE, Van Horn L, Vitolins MZ, Datta M, LeBlanc ES, Cauley JA, Rossouw JE (2013) Health risks and benefits from calcium and vitamin D supplementation: Women's Health Initiative clinical trial and cohort study. *Osteoporos Int* 24:567–580

[CAS](#) [PubMed](#) [Google Scholar](#)

59. 59.

Malihi Z, Lawes CMM, Wu Z, Huang Y, Waayer D, Toop L, Khaw KT, Camargo CA, Scragg R (2019) Monthly high-dose vitamin D supplementation does not increase kidney stone risk or serum calcium: results from a randomized controlled trial. *Am J Clin Nutr* 109:1578–1587

[PubMed](#) [Google Scholar](#)

60. 60.

Avenell A, Mak JC, O'Connell D (2014) Vitamin D and vitamin D analogues for preventing fractures in post-menopausal women and older men. *Cochrane Database Syst Rev* (4):CD000227

61.61.

Bjelakovic G, Gluud LL, Nikolova D, Whitfield K, Wetterslev J, Simonetti RG, Bjelakovic M, Gluud C (2014) Vitamin D supplementation for prevention of mortality in adults. *Cochrane Database Syst Rev* (1):CD007470

62. 62.

Kahwati LC, Weber RP, Pan H, Gourlay M, LeBlanc E, Coker-Schwimmer M, Viswanathan M (2018) Vitamin D, calcium, or combined supplementation for the primary prevention of fractures in community-dwelling adults: evidence report and systematic review for the US preventive services task force. *JAMA* 319:1600–1612

[PubMed](#) [Google Scholar](#)

63. 63.

Malihi Z, Wu Z, Stewart AW, Lawes CM, Scragg R (2016) Hypercalcemia, hypercalciuria, and kidney stones in long-term studies of vitamin D supplementation: a systematic review and meta-analysis. *Am J Clin Nutr* 104:1039–1051

[CAS](#) [PubMed](#) [Google Scholar](#)

64. 64.

Ferraro PM, Taylor EN, Gambaro G, Curhan GC (2017) Vitamin D intake and the risk of incident kidney stones. *J Urol* 197:405–410

[CAS](#) [PubMed](#) [Google Scholar](#)

65. 65.

Wei FF, Thijs L, Zhang ZY, Jacobs L, Yang WY, Salvi E, Citterio L, Cauwenberghs N, Kuznetsova T, Drummen NEA, Hara A, Manunta P, Li Y, Verhamme P, Allegaert K, Cusi D, Vermeer C, Staessen JA (2018) The risk of nephrolithiasis is causally related to inactive matrix Gla protein, a marker of vitamin K status: a Mendelian randomization study in a Flemish population. *Nephrol Dial Transplant* 33:514–522

[CAS](#) [PubMed](#) [Google Scholar](#)

66. 66.

Thamilselvan S, Menon M (2005) Vitamin E therapy prevents hyperoxaluria-induced calcium oxalate crystal deposition in the kidney by improving renal tissue antioxidant status. *BJU Int* 96:117–126

[CAS](#) [PubMed](#) [Google Scholar](#)

67. 67.

Sidhu H, Schmidt ME, Cornelius JG, Thamilselvan S, Khan SR, Hesse A, Peck AB (1999) Direct correlation between hyperoxaluria/oxalate stone disease and the absence of the gastrointestinal tract-dwelling bacterium *Oxalobacter formigenes*: possible prevention by gut recolonization or enzyme replacement therapy. *J Am Soc Nephrol* 10(Suppl 14):S334–S340

[CAS](#) [PubMed](#) [Google Scholar](#)

68. 68.

Sakhaee K (2014) Epidemiology and clinical pathophysiology of uric acid kidney stones. *J Nephrol* 27:241–245

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

69. 69.

Stern JM, Moazami S, Qiu Y, Kurland I, Chen Z, Agalliu I, Burk R, Davies KP (2016) Evidence for a distinct gut microbiome in kidney stone formers compared to non-stone formers. *Urolithiasis* 44:399–407

[PubMed](#) [Google Scholar](#)

70. 70.

Mehta M, Goldfarb DS, Nazzal L (2016) The role of the microbiome in kidney stone formation. *Int J Surg* 36:607–612

[PubMed](#) [PubMed Central](#) [Google Scholar](#)

71.71.

Ticinesi A, Milani C, Guerra A, Allegri F, Lauretani F, Nouvenne A, Mancabelli L, Lugli GA, Turrone F, Duranti S, Mangifesta M, Viappiani A, Ferrario C, Dodi R, Dall'Asta M, Del Rio D, Ventura M, Meschi T (2018) Understanding the gut-kidney axis in nephrolithiasis: an analysis of the gut microbiota composition and functionality of stone formers. *Gut* 67:2097–2106

[CAS](#) [PubMed](#) [Google Scholar](#)

72.72.

Liebman M, Al-Wahsh IA (2011) Probiotics and other key determinants of dietary oxalate absorption. *Adv Nutr* 2:254–260

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

73.73.

Kumar R, Mukherjee M, Bhandari M, Kumar A, Sidhu H, Mittal RD (2002) Role of *Oxalobacter formigenes* in calcium

oxalate stone disease: a study from North India. *Eur Urol* 41:318–322

[CAS](#) [PubMed](#) [Google Scholar](#)

74. 74.

Mittal RD, Kumar R, Mittal B, Prasad R, Bhandari M (2003) Stone composition, metabolic profile and the presence of the gut-inhabiting bacterium *Oxalobacter formigenes* as risk factors for renal stone formation. *Med Princ Pract* 12:208–213

[CAS](#) [PubMed](#) [Google Scholar](#)

75.75.

Kwak C, Kim HK, Kim EC, Choi MS, Kim HH (2003) Urinary oxalate levels and the enteric bacterium *Oxalobacter formigenes* in patients with calcium oxalate urolithiasis. *Eur Urol* 44:475–481

[CAS](#) [PubMed](#) [Google Scholar](#)

76. 76.

Troxel SA, Sidhu H, Kaul P, Low RK (2003) Intestinal *Oxalobacter formigenes* colonization in calcium oxalate stone formers and its relation to urinary oxalate. *J Endourol* 17:173–176

[PubMed](#) [Google Scholar](#)

77.77.

Siener R, Bangen U, Sidhu H, Hönow R, von Unruh G, Hesse A (2013) The role of *Oxalobacter formigenes* colonization in calcium oxalate stone disease. *Kidney Int* 83:1144–1149

[CAS](#) [PubMed](#) [Google Scholar](#)

78. 78.

Kaufman DW, Kelly JP, Curhan GC, Anderson TE, Dretler SP, Preminger GM, Cave DR (2008) Oxalobacter formigenes may reduce the risk of calcium oxalate kidney stones. *J Am Soc Nephrol* 19:1197–1203

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

79. 79.

Siva S, Barrack ER, Reddy GP, Thamilselvan V, Thamilselvan S, Menon M, Bhandari M (2009) A critical analysis of the role of gut Oxalobacter formigenes in oxalate stone disease. *BJU Int* 103:18–21

[PubMed](#) [Google Scholar](#)

80. 80.

Duncan SH, Richardson AJ, Kaul P, Holmes RP, Allison MJ, Stewart CS (2002) Oxalobacter formigenes and its potential role in human health. *Appl Environ Microbiol* 68:3841–3847

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

81.81.

Hoppe B, Beck B, Gatter N (2006) Oxalobacter formigenes: a potential tool for the treatment of primary hyperoxaluria type 1. *Kidney Int* 70:1305–1310

[CAS](#) [PubMed](#) [Google Scholar](#)

82. 82.

Jairath A, Parekh N, Otano N, Mishra S, Ganpule A, Sabnis R, Desai M (2015) Oxalobacter formigenes: opening the door to probiotic therapy for the treatment of hyperoxaluria. *Scand J Urol* 49:334–337

[CAS](#) [PubMed](#) [Google Scholar](#)

83. 83.

Milliner D, Hoppe B, Groothoff J (2018) A randomised Phase II/III study to evaluate the efficacy and safety of orally administered Oxalobacter formigenes to treat primary hyperoxaluria. *Urolithiasis* 46:313–323

[CAS](#) [PubMed](#) [Google Scholar](#)

84. 84.

Hoppe B, Niaudet P, Salomon R, Harambat J, Hulton SA, Van't Hoff W, Mochhala SH, Deschênes G, Lindner E, Sjögren A, Cochat P (2017) A randomised Phase I/II trial to evaluate the efficacy and safety of orally administered Oxalobacter formigenes to treat primary hyperoxaluria. *Pediatr Nephrol* 32:781–790

[PubMed](#) [Google Scholar](#)

85. 85.

Lieske JC, Goldfarb DS, De Simone C, Regnier C (2005) Use of a probiotic to decrease enteric hyperoxaluria. *Kidney Int* 68:1244–1249

[CAS](#) [PubMed](#) [Google Scholar](#)

86. 86.

Goldfarb DS, Modersitzki F, Asplin JR (2007) A randomized, controlled trial of lactic acid bacteria for idiopathic hyperoxaluria. *Clin J Am Soc Nephrol* 2:745–749

[PubMed](#) [Google Scholar](#)

87. 87.

Lieske JC, Tremaine WJ, De Simone C, O'Connor HM, Li X, Bergstralh EJ, Goldfarb DS (2010) Diet, but not oral probiotics, effectively reduces urinary oxalate excretion and calcium oxalate supersaturation. *Kidney Int* 78:1178–1185

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

88. 88.

Campieri C, Campieri M, Bertuzzi V, Swennen E, Matteuzzi D, Stefoni S, Pirovano F, Centi C, Ulisse S, Famularo G, De Simone C (2001) Reduction of oxaluria after an oral course of lactic acid bacteria at high concentration. *Kidney Int* 60:1097–1105

[CAS](#) [PubMed](#) [Google Scholar](#)

89. 89.

Suryavanshi MV, Bhute SS, Gune RP, Shouche YS (2018) Functional eubacteria species along with trans-domain gut inhabitants favour dysgenic diversity in oxalate stone disease. *Sci Rep* 8:16598

[PubMed](#) [PubMed Central](#) [Google Scholar](#)

90. 90.

Miller AW, Choy D, Penniston KL, Lange D (2019) Inhibition of urinary stone disease by a multi-species bacterial network ensures healthy oxalate homeostasis. *Kidney Int* 96:180–188

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

91.91.

Zampini A, Nguyen AH, Rose E, Monga M, Miller AW (2019) Defining dysbiosis in patients with urolithiasis. *Sci Rep* 9:5425

[PubMed](#) [PubMed Central](#) [Google Scholar](#)

92. 92.

Peck AB, Canales BK, Nguyen CQ (2016) Oxalate-degrading microorganisms or oxalate-degrading enzymes: which is the future therapy for enzymatic dissolution of calcium-oxalate uroliths in recurrent stone disease? *Urolithiasis* 44:45–50

[CAS](#) [PubMed](#) [Google Scholar](#)

93. 93.

Khan SR (2013) Reactive oxygen species as the molecular modulators of calcium oxalate kidney stone formation: evidence from clinical and experimental investigations. *J Urol* 189:803–811

[CAS](#) [PubMed](#) [Google Scholar](#)

94. 94.

Khan SR (2004) Crystal-induced inflammation of the kidneys: results from human studies, animal models, and tissue-culture studies. *Clin Exp Nephrol* 8:75–88

[CAS](#) [PubMed](#) [Google Scholar](#)

95. 95.

Khan SR (2014) Reactive oxygen species, inflammation and calcium oxalate nephrolithiasis. *Transl Androl Urol* 3:256–276

[PubMed](#) [PubMed Central](#) [Google Scholar](#)

96. 96.

Nirumand MC, Hajialyani M, Rahimi R, Farzaei MH, Zingue S, Nabavi SM, Bishayee A (2018) Dietary plants for the prevention and management of kidney stones: preclinical and clinical evidence and molecular mechanisms. *Int J Mol Sci.* 19:pii:E765

[Google Scholar](#)

97. 97.

Cealan A, Coman RT, Simon V, Andras I, Telecan T, Coman I, Crisan N (2019) Evaluation of the efficacy of Phyllanthus niruri standardized extract combined with magnesium and vitamin B6 for the treatment of patients with uncomplicated nephrolithiasis. Med Pharm Rep 92:153–157

[PubMed](#) [PubMed Central](#) [Google Scholar](#)

98. 98.

Premgamone A, Sriboonlue P, Disatapornjaroen W et al (2001) A long-term study on the efficacy of a herbal plant, *Orthosiphon grandiflorus*, and sodium potassium citrate in renal calculi treatment. Southeast Asian J Trop Med Public Health 32:654–660

[CAS](#) [PubMed](#) [Google Scholar](#)

99. 99.

Singh RG, Behura SK, Kumar R (2010) Litholytic property of Kulattha (*Dolichous biflorus*) vs potassium citrate in renal calculus disease: a comparative study. J Assoc Physicians India 58:286–289

[PubMed](#) [Google Scholar](#)

100. 100.

Singh I, Bishnoi I, Agarwal V, Bhatt S (2011) Prospective randomized clinical trial comparing phytotherapy with potassium citrate in management of minimal burden (≤ 8 mm) nephrolithiasis. Urol Ann 3:75–81

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

101. 101.

Singh RG, Singh TB, Kumar R et al (2012) A comparative pilot study of litholytic properties of Celosia argental (Sitivaraka) versus potassium citrate in renal calculus disease. *J Altern Complement Med* 18:427–428

[PubMed](#) [Google Scholar](#)

102. 102.

Brardi S, Imperiali P, Cevenini G et al (2012) Effects of the association of potassium citrate and agropyrum repens in renal stone treatment: results of a prospective randomized comparison with potassium citrate. *Arch Ital Urol Androl* 84:61–67

[PubMed](#) [Google Scholar](#)

103. 103.

Monti E, Trinchieri A, Magri V, Cleves A, Perletti G (2016) Herbal medicines for urinary stone treatment. A systematic review. *Arch Ital Urol Androl* 88:38–46

[CAS](#) [PubMed](#) [Google Scholar](#)

104. 104.

Patankar S, Dobhada S, Bhansali M et al (2008) A prospective, randomized, controlled study to evaluate the efficacy and tolerability of Ayurvedic formulation “varuna and banana stem” in the management of urinary stones. *J Altern Complement Med* 14:1287–1290

[PubMed](#) [Google Scholar](#)

105. 105.

Mohanty NK, Nayak RL, Patki PS (2010) Safety and efficacy of an Ayurvedic formulation Cystone in management of ureteric

calculi: a prospective randomized placebo controlled study. *Am J Pharmacol Toxicol* 5:58–64

[Google Scholar](#)

106. 106.

Shekar Kumaran MG, Patki PS (2011) Evaluation of an Ayurvedic formulation (Cystone), in urolithiasis: a double blind, placebo-controlled study. *Eur J Integr Med* 3:23–28

[Google Scholar](#)

107. 107.

Upadhyay V, Malekar S, Deshpande S, Ahmad S, Shamsuddin (2011) Safety and efficacy of UNEX capsules in management of ureteric calculi: a prospective, randomised placebo-controlled study. *Int J Green Pharm* 5:346–349

[Google Scholar](#)

108. 108.

Ceban A (2012) Efficacy of a fixed combination of Centaurii herba, Levistici radix and Rosmarini folium in urinary lithiasis. Results of an open randomised cohort study. *Z Phytother* 33:19–23

[Google Scholar](#)

109. 109.

Faridi P, Seradj H, Mohammadi-Samani S, Vossoughi M, Mohagheghzadeh A, Roozbeh J (2014) Randomized and double-blinded clinical trial of the safety and calcium kidney stone dissolving efficacy of Lapis judaicus. *J Ethnopharmacol* 156:82–87

[CAS PubMed Google Scholar](#)

110. 110.

Rathod RB, Amilkanthwar RH (2015) The effect of Kadalikshar in the management of Mutrashmari (Urolithiasis). *Int J Res Ajurveda Pharm* 6:315–319

[CAS](#) [Google Scholar](#)

111. 111.

Ardakani Movaghathi MR, Yousefi M, Saghebi SA, Sadeghi Vazin M, Iraj A, Mosavat SH (2019) Efficacy of black seed (*Nigella sativa* L.) on kidney stone dissolution: a randomized, double-blind, placebo-controlled, clinical trial. *Phytother Res* 33:1404–1412

[CAS](#) [PubMed](#) [Google Scholar](#)

112. 112.

Erickson SB, Vrtiska TJ, Lieske JC (2011) Effect of Cystone® on urinary composition and stone formation over a one year period. *Phytomedicine* 18:863–867

[CAS](#) [PubMed](#) [PubMed Central](#) [Google Scholar](#)

113. 113.

Erickson SB, Vrtiska TJ, Canzanello VJ, Lieske JC (2011) Cystone® for 1 year did not change urine chemistry or decrease stone burden in cystine stone formers. *Urol Res* 39:197–203

[PubMed](#) [Google Scholar](#)

114. 114.

Micali S, Sighinolfi MC, Celia A et al (2006) Can *Phyllanthus niruri* affect the efficacy of extracorporeal shock wave lithotripsy for renal stones? A randomized, prospective, long-term study. *J Urol* 176:1020–1022

[CAS](#) [PubMed](#) [Google Scholar](#)

115. 115.

Peng Y, Hu XH, Li X, Zhou GP (2010) Quantong recipe integrated with ureteroscopic laser lithotripsy for ureteral calculi. *Zhong Xi Yi Jie He Xue Bao* 8:530–534

[CAS](#) [PubMed](#) [Google Scholar](#)

116. 116.

Kobayashi M, Naya Y, Kino M, Awa Y, Nagata M, Suzuki H, Yamaguchi K, Nozumi K, Ichikawa T (2008) Low dose tamsulosin for stone expulsion after extracorporeal shock wave lithotripsy: efficacy in Japanese male patients with ureteral stone. *Int J Urol* 15:495–498

[CAS](#) [PubMed](#) [Google Scholar](#)

117. 117.

Takada M, Yano H, Kanbara N, Kurita T, Kohri K, Kato Y, Iguchi M (1997) Effect of Chorei-to on spontaneous discharge of urinary stones after extracorporeal shock wave lithotripsy (ESWL). *Hinyokika Kyo* 43:311–314

[CAS](#) [PubMed](#) [Google Scholar](#)

118. 118.

Xiang W, Guo YL, Zhang JY, Zheng T, Zhang CH (2018) Curative effects of Ningmitai capsules on the residual fragments and postoperative complications following lithotripsy treatment of upper urinary calculi. *Zhonghua Wai Ke Za Zhi* 56:776–780

[CAS](#) [PubMed](#) [Google Scholar](#)

119. 119.

Trinchieri A, Croppi E, Simonelli G, Sciorio C, Montanari E (2019) Anthropometric variables, physical activity and dietary intakes of patients with uric acid nephrolithiasis.

Urolithiasis. <https://doi.org/10.1007/s00240-019-01138-w>(Epub ahead of print)

[Article PubMed Google Scholar](#)

120. 120.

Chae JY, Kim JW, Kim JW, Yoon CY, Park HS, du Moon G, Oh MM (2013) Increased fluid intake and adequate dietary modification may be enough for the successful treatment of uric acid stone. Urolithiasis 41:179–182

[PubMed Google Scholar](#)

121. 121.

Fink HA, Wilt TJ, Eidman KE, Garimella PS, MacDonald R, Rutks IR et al (2013) Medical management to prevent recurrent nephrolithiasis in adults: a systematic review for an American College of Physicians Clinical Guideline. Ann Intern Med 158:535–543

[PubMed Google Scholar](#)

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AUA, JOB, KHB, JP and IS searched the literature and wrote individual chapters of this manuscript. RNP, GSV and AT combined the chapters, streamlined and edited the first version of the manuscript. NB developed the concept, supervised and coordinated the project, edited and amended the final version.

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Ethics declarations

Conflict of interest

All authors declare that they have no conflict of interest in this publication.

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