Dr. Himanshu Sharma
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PATIENT GUIDE

Food & Lifestyle Changes for Kidney Stones

Having one kidney stone raises the chance of forming another — up to half of people who have had a stone develop a new one within ten years. The good news: simple, consistent changes to what you drink, eat and how you live can lower that risk considerably. This sheet explains what helps, what to limit, and why.

THE SIX GOLDEN RULES

1 Drink more fluid
Aim for 3–3.5 litres a day so your urine stays pale.*

2 Cut down on salt
Less than 5 g a day — about one level teaspoon in total.

3 Keep your calcium
Eat normal amounts of dairy. Cutting calcium can *increase* stones.

4 Moderate animal protein
Smaller portions of meat, chicken, fish and eggs.

5 Balance oxalate foods
Enjoy them in moderation, alongside calcium-rich foods.

6 Stay active, stay trim
A healthy weight and regular exercise lower stone risk.

** If you have heart disease or chronic kidney disease, follow your doctor's advice on fluid intake.*

KNOW YOUR STONE

Advice works best when it is matched to **your** stone type. If you pass a stone, save it (strain your urine through a tea strainer) and bring it to your appointment. A **stone analysis** and, for people with repeated stones, a **24-hour urine test** show exactly what is driving stone formation — so your plan can be personalised rather than guessed.



YOUR UROLOGIST

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1. Fluids — your single most powerful tool

Stones form when minerals in urine become too concentrated and crystallise. Dilute urine keeps those minerals dissolved. No medicine or diet change works as well without it.

CHECK YOUR URINE COLOUR



Good — well hydrated **Drink more** **Dehydrated** — drink now

- **Aim for 3–3.5 litres of fluid a day**, enough to pass at least 2.5 litres of urine.
- **Spread it through the day** — a glass on waking, with every meal, between meals, and one before bed.
- **Drink extra in heat and humidity**, after exercise, during travel, or if you work outdoors. Mumbai summers and monsoon humidity cause heavy fluid loss through sweat.
- **Water is best.** Nimbu pani (without added salt or sugar), unsalted chaas and coconut water also count towards your fluid intake.
- **Avoid** colas, packaged fruit juices and sugar-sweetened drinks — these can raise stone risk.

Tip: carry a 1-litre bottle and refill it three to three-and-a-half times a day.

IMPORTANT — HEART OR KIDNEY DISEASE

If you have **heart disease** or **chronic kidney disease (CKD)**, your fluid intake must be guided by your doctor for that condition. Do not aim for more than 3 litres a day unless your doctor has advised it.

2. Salt — the hidden trigger

Extra salt makes your kidneys pass more calcium into the urine, which feeds calcium stones. Most salt comes not from the salt shaker but from prepared foods.

- **Keep total salt under 5 g a day** — roughly one level teaspoon, including salt already in food.
- **Go easy on** papad, achar (pickles), namkeen, chips, instant noodles, sauces, ketchup, processed and packaged foods, and restaurant or takeaway meals.
- Don't add salt at the table. Flavour food with lemon, herbs, garlic, ginger and spices instead.
- Read labels: **sodium × 2.5 = salt**. Choose products with less than 120 mg sodium per 100 g where possible.

3. Calcium — don't cut it out

This surprises many patients: **eating normal amounts of calcium lowers the risk of calcium oxalate stones.** Calcium in food binds oxalate in the gut, so less oxalate reaches the kidneys. Cutting out dairy often makes stones *more* likely and weakens bones.

- **Aim for about 1,000–1,200 mg of calcium a day from food** — for example, 2–3 servings of milk, curd, paneer or buttermilk.
- **Have calcium with meals**, especially meals containing oxalate-rich foods such as palak.
- **Take calcium or vitamin D supplements only if advised**, and then with food rather than on an empty stomach.

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4. Animal protein — moderate portions

Large amounts of meat, chicken, fish and eggs make urine more acidic, raise uric acid and calcium, and lower citrate — a natural stone inhibitor.

- Keep non-vegetarian portions to **about the size of your palm**, once a day rather than at every meal.
- **Limit** red meat, organ meats (liver, kidney, brain) and shellfish — especially if you form uric acid stones.
- Build more meals around dal, pulses, vegetables and whole grains in normal portions.
- Avoid high-protein powders and crash "high-protein" diets unless discussed with your doctor.

5. Oxalate — balance, don't banish

Oxalate combines with calcium to form the most common type of stone. You don't need to avoid these foods completely — many are otherwise healthy. Eat them in moderation and **pair them with a calcium source** (for example, palak with paneer or a glass of chaas).

- **Higher-oxalate foods:** spinach (palak), beetroot, nuts (especially almonds and cashews), peanuts, chocolate and cocoa, sweet potato, soy products, and very strong black tea.
- **Avoid high-dose vitamin C supplements** (1,000 mg a day or more) unless prescribed — the body converts excess vitamin C into oxalate.
- If a 24-hour urine test shows high oxalate, a more specific plan will be made for you.

6. Citrate, sugar and fruit

Citrate is a natural stone inhibitor found in citrus fruits. Sugar — particularly the fructose in sweetened drinks — works against you.

- **Include citrus:** fresh lemon or lime in water, oranges and mosambi. Add the juice of one to two lemons to your daily water.
- Eat plenty of fresh fruit and vegetables — they make urine less acidic and supply potassium.
- **Cut down** on sweets, colas, packaged juices and sugary drinks.
- Your doctor may prescribe a **citrate supplement**. Please take alkalising products only if advised, as they are not suitable for every stone type.

Beyond the plate: lifestyle

Healthy weight
Excess weight, diabetes and high blood pressure all raise stone risk. Gradual, steady weight loss helps — avoid crash or very-low-carbohydrate diets.

Regular activity
Aim for at least 150 minutes of moderate exercise a week, such as brisk walking. Drink extra water before, during and after.

Heat & travel
Long drives, flights, outdoor work and hot weather dehydrate you quickly. Plan your water in advance.

Medicines & supplements
Tell your doctor about all tablets, supplements, protein powders and herbal products. Some can promote stones. Never stop prescribed medicines on your own.

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AT A GLANCE

Your stone-smart food guide

A general guide for most stone formers. Your plan may be adjusted once your stone type is known.

ENJOY FREELY	IN MODERATION	LIMIT OR AVOID
• Water — your main drink • Nimbu pani (no added salt or sugar) • Unsalted chaas, milk, curd, paneer • Oranges, mosambi, melons, most fresh fruit • Lauki, cucumber, cabbage, cauliflower and most vegetables • Dal, pulses and whole grains in normal portions • Coconut water (counts towards fluids)	• Spinach (palak), beetroot • Almonds, cashews, peanuts • Chocolate and cocoa • Sweet potato, soy products • Strong black tea • Meat, chicken, fish, eggs — palm-sized portions • Fruit juice — small glass, fresh	• Papad, achar, namkeen, chips • Instant noodles, packaged and processed foods • Frequent restaurant or takeaway meals • Red meat, organ meats, shellfish • Colas and sugar-sweetened drinks • High-dose vitamin C supplements • Alcohol, including beer

Different stones, different plans

STONE TYPE	NOTE	KEY FOCUS
Calcium oxalate	Most common	Fluids, low salt, normal dietary calcium, moderate oxalate, more citrus.
Uric acid	Linked to diet, weight, diabetes	Fluids, less red meat, organ meats, shellfish and alcohol; weight control. Urine-alkalising medicine is often prescribed.
Calcium phosphate	Needs evaluation	Fluids and low salt. Underlying causes are checked. Take alkalising products only if prescribed.
Struvite	Infection-related	Complete stone removal and treatment of urinary infection.
Cystine	Rare, inherited	Very high fluid intake, low salt and specialised medication.

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Common myths, corrected

MYTH	FACT
"I should stop milk and dairy."	Normal dietary calcium **protects** against calcium oxalate stones. Cutting it out usually backfires.
"Tomatoes and their seeds cause stones."	Tomatoes are low in oxalate and fine as part of a normal diet.
"Beer helps flush stones out."	Beer is not a treatment. Heavy drinking raises uric acid, and water is the right choice.
"My stone has been removed, so I'm cured."	Treatment removes the stone, not the cause. Prevention is a long-term habit.
"A home remedy will dissolve my stone."	Most stones cannot be dissolved by home remedies. Please don't delay proper assessment.

SEEK URGENT MEDICAL CARE IF YOU HAVE

- **Fever, chills or shivering** together with stone pain — this can be a serious infection behind a blocked kidney.
- Severe pain not relieved by your prescribed painkillers, or persistent vomiting.
- Passing very little or no urine.
- Heavy blood or clots in the urine.
- Stone symptoms if you have **only one kidney**, a kidney transplant, or are **pregnant**.

MY PERSONAL PLAN (to be filled in at your consultation)

My stone type _____

Daily fluid target _____

Medicines / supplements _____

Specific food advice _____

Next review / tests due _____

COMING SOON

Never Again

Dr. Himanshu Sharma's book on preventing kidney stones — a fuller, practical guide to staying stone-free for life.

SCAN FOR UPDATES

Follow on Instagram for launch news.

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This leaflet provides general information for patients and families. It does not replace individual medical advice. Your recommendations may differ depending on your stone type, test results and other health conditions — please follow the advice given to you personally, and speak to your doctor before making major changes to your diet, fluids or medicines. Content based on current AUA (American Urological Association) and EAU (European Association of Urology) guidance on the medical management of kidney stones.