



Hemorrhagic Cyst in a Polycystic Kidney Disease Presenting as Renal Cell Carcinoma: A Case Report

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ABSTRACT

This Work Studied about a 60-year-old woman, with a medical history of high blood pressure, had an autosomal dominant polycystic kidney disease (ADPKD) with end-stage renal disease under regular peritoneal dialysis.

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Introduction

A 60-year-old woman, with a medical history of high blood pressure, had an autosomal dominant polycystic kidney disease (ADPKD) with end-stage renal disease under regular peritoneal dialysis since January 2014. The patient presented to our institution with right flank pain and gross hematuria, physical examination was unremarkable. Laboratory examination revealed a normocytic anemia with a hemoglobin at 10,6 g/dL. Platelet and white blood cell count were normal, her serum creatinin was 85,5 mg/l. Urinalysis showed microscopic hematuria and no infection.

Computed tomography (CT) of the abdomen was performed, revealing a right cystic lesion with irregular and thick septa, with coarse calcifications, and clear enhancement after intravenous contrast injection described as category III of Bosniak classification (Figure 1).



Figure1. CT scan with Iv injection demonstrating a suspicious cyst of the right kidney with a thick septa and calcifications.

Under the impression of ADPKD with suspected renal malignancy, the patient received Open bilateral radical nephrectomy (Figure 2). The pathologic reports with the macroscopic and histologic examination showed a hemorrhagic cyst without any signs of malignancies. The other parts of both kidneys were confirmed as adult polycystic kidney disease by the pathologist.



Figure 2 . Macroscopic aspects of the lesion after radical nephrectomy.