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Acquired cystic disease of kidney associated renal cell carcinoma mimicking adult polycystic disease of kidney

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Clinical History: A 59 -year-old male with history of chronic hypertension, end stage renal disease, dialysis presented to UI health for bilateral cadaveric kidney transplant. Hemorrhagic nodule from enlarged cystic kidney is identified.

Diagnosis: Acquired cystic disease associated renal cell carcinoma

Differential Diagnosis:

- Adult (AD) polycystic kidney disease
- Acquired Cystic disease of Kidney
- Acquired Cystic disease of Kidney associated renal cell carcinoma

Key Microscopic Features:

- Acinar, tubular, multicystic, papillary and solid pattern in various combinations
- Presence of inter or intracytoplasmic lumina imparting sieve like appearance
- Large tumor cells with eosinophilic cytoplasm and prominent nucleoli
- Calcium oxalate crystals in stroma and lumina

Immunohistochemical stains:

- AE1/AE3, CD10, AMACR positive
- CK7: Negative

Discussion:

- Acquired Cystic Kidney Disease (ACKD) can morphologically mimic autosomal dominant polycystic kidney disease
- Acquired cystic disease associated RCC is uniquely associated with ACKD recognized as a distinct clinical entity in WHO-2016
- Pancreatic cysts and possibly liver cysts can be seen in patients on hemodialysis.

Biography

Snehal Shankar Sonawane has completed her Medical School at Government Medical College Miraj and has done Diplomate of National Board in Pathology from RCSM government medical college kolhapur. She is presently working as Pathology Resident Physician at University of Illinois at Chicago. Her research work is in area of 'Dry Eye Disease' and is published in reputed journals.

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