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Challenge for treatment: Bilateral renal artery aneurysms

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Visceral Artery Aneurysms (VAAs) are rare entities with an estimated incidence between 0.01% and 0.2%. Ability to use advanced imaging technology such as computed tomography, magnetic resonance, ultrasonography etc has increased incidental detection of asymptomatic visceral aneurysms. Incidence of renal artery aneurysm is 22% of all VAA and the prevalence in the general population is from 0.01% up to 1%. Renal artery aneurysms are bilateral in about 10% of cases. Usually they have been described separately because of slightly shown difference in etiology, natural history and strongly correspondence with hypertension. The most frequent cause is atherosclerosis (32%). There are controversial data about the rate rupture of renal artery aneurysm. Previous study reported the rupture rate for renal artery aneurysms is less than 3%. In a recently published series, asymptomatic RRAs being managed conservatively no rupture was observed in a mean follow period of 3 years. From the other side some previous study reported different rate rupture of renal artery aneurysm about 30% especially when it is located after bifurcation of the main renal artery, closer to the renal calyx. Depending of the size and location, rupture of these lesions might be associated with high mortality rate, 25% to 75%. Beside rupture, thrombosis and distal embolization are well known complications of renal and aneurysms. We report an unusual case presented with both renal arteries aneurysms in combination with splenic artery aneurysm.

Biography

Nikola M Fatic is a Vascular Surgeon in Training from Clinical Centre of Montenegro. He is a PD Candidate at Medical Faculty of Kragujevac, Serbia. He is a National Representative of Montenegro at European Society for Vascular and Endovascular Surgery (ESVT/ESVS). He has published more than 10 papers in reputed journals and has been serving as a reviewer in reputed journals.

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