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Autosomal dominant polycystic kidney disease, an incidental finding with trauma: Case report and review of the literature

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Introduction: Pre-existing renal lesions predispose kidneys to effects of otherwise insignificant blunt trauma, and may uncommonly present as an incidental finding in the workup of a suspected renal injury. This is a case report of a 28 year-old male diagnosed incidentally with Autosomal Dominant Polycystic Kidney Disease (ADPKD) as part of the workup for suspected kidney injury secondary to assault by a brick. This case study serves as a learning opportunity and future reference in the cases and management of blunt trauma to kidneys with pre-existing lesions.

Methods: The study design takes the form of a case report and an overview of the relevant literature. A literature review of the published was done by searching the following databases: PubMed, Google Scholar, Cochrane library, Embase and MEDLINE.

Results: The literature search revealed 45 published cases of trauma to pre-existing renal lesions. Eight out of the 45 cases involved trauma to patients with Autosomal Dominant Polycystic Kidney Disease (ADPKD) (18%). Four out of the eight cases required nephrectomy, and three cases were managed non-operatively.

Conclusion: The conclusions of this study are: Patients with abnormal kidneys require counseling regarding increased risk of injury following blunt abdominal trauma; consideration regarding transfusions for patients that could possibly require renal transplant at a later stage due to risk of antigen sensitization; raised index of suspicion of undiagnosed pre-existing renal lesions in minor blunt renal trauma that present with signs and symptoms out of proportion with the mechanism of trauma and; lowered threshold and the necessity of CT of the abdomen for cases of blunt renal trauma with a history suggesting the possibility of a pre-existing lesion, possibly even in absence of gross haematuria.

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Huge aneurysmal bone cyst mimicking a kidney tumor: Case report and review of literature

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Aneurysmal bone cyst (ABC) is an uncommon osteolytic lesion occurs in 1.4 per 100000 patients. ABCs are benign tumors with low risk of malignant transformation (osteosarcoma). We report a case of a large ABC of the 4th lumbar vertebra resembling a kidney mass that presented with flank pain, urinary incontinence and neurological symptoms. Recurrence rate in ABC is 25%, if not completely removed. Aggressive curettage with bone grafting or en bloc resection is usually recommended. Angiography was initially performed and due to the absence of mass hypervascularity, embolization was not considered and patient underwent a complete resection in two stages. ABC can mimic renal cell carcinoma and other malignant bone tumors. In huge tumors with difficult location as in our case, we recommend two stage procedure to ensure complete resection and hence lower recurrence rate and better outcome.

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