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Unusual case of bilateral ureteric stones causing acute renal failure and anuria

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Introduction: We present a case of bilateral ureteric colic causing anuric acute renal failure. Bilateral ureteric colic resulting in acute renal failure is not an unheard of presentation. However in our case the patient had only 3 mm calculi making our case unique.

Background: Bilateral renal calculi are an uncommon cause of acute kidney injury (AKI). Obstructing ureteroliths rarely lead to AKI without some underlying renal disease or anatomic abnormalities, such as a solitary kidney or horseshoe kidney. The incidence of a unilateral uterovesicular junction obstruction secondary to a stone is reported at 20% in the literature. However, there are very few case reports in the urology, nephrology or emergency medicine literature regarding the incidence of bilateral ureteric calculi are uncommon and cases resulting in AKI and anuria are extremely rare.

Case Presentation: A 30 year old male who was otherwise healthy presented with bilateral colicky flank pain for 4 days and started to develop macroscopic haematuria. After proper pain management in the emergency department, the patient was found to have a raised serum creatinine (152 μ mol/L). A CT scan was performed showing two 3 mm calculi in the left and right proximal ureters. Ultrasound showed moderate left hydroureteronephrosis and mild right hydroureteronephrosis. Due to the relatively small sizes of the stones involved and the clinical picture of the patient, he was planned for medical expulsive therapy. Surprisingly the patient developed complete anuria for 2 days and represented to the ED with a serum creatinine of 843 μ mol/L. Bilateral double J stents were placed and urgent ureteroscopy was done for the patient. Following treatment, his condition significantly improved and his renal function returned back to normal within 4 days.

Discussion: Even small bilateral stones can result in acute kidney injury.

Biography

Mohamed Abbasy is currently working as an emergency medicine clinical fellow in Hamad Medical Corporation – Doha – Qatar. He successfully completed the Injury Prevention Research and Training Program held in University of Maryland, School of Medicine, Baltimore, Maryland, USA. He has attended in the R Adams Shock Trauma Center, University of Maryland, School of Medicine, Baltimore, Maryland, USA. He has attended in the R Adams Shock Trauma Center, University of Maryland, School of Medicine, Baltimore, Maryland in 2008. He finished his training in emergency medicine as successfully awarded the fellowship of Egyptian Board of Emergency Medicine in 2009. He has a good experience in working in Gulf region and worked as an assistant Program director of the Saudi Board of Emergency Medicine in Eastern region – KSA in 2013. He successfully passed his membership examination of the Royal College of Emergency Medicine UK in 2014. He is interested in critical care, emergency ultrasound and resuscitation teaching working as instructor of (ACLS- APLS- ATLS- ALS- APLS- STEPs) courses.

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