

## 요관 협착이 동반된 만성 콩팥병 환자에게서 발생한 급성 신우신염의 치료 1예

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### A Case of Successfully Treated Acute Pyelonephritis with Ureteral Stricture in a Patient with Chronic Kidney Disease

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**Introduction:** Acute kidney injury associated with acute pyelonephritis caused by segmental ureteritis is not common. We report a case of acute kidney injury caused by segmental ureteritis successfully treated by percutaneous nephrostomy and antibiotics therapy.

**Case:** A 65-year-old Korean woman with a history of diabetes visited our emergency department complaining of lower abdominal pain for 3 days with fever of 38.5°C. Her blood pressure was 100/50 mmHg and heart rate 120 beats/min. Urine analysis showed turbid appearance with obvious pyuria and hematuria. Initial laboratory findings revealed an elevated white blood cell count ( $14.6 \times 10^3/\text{mL}$ ) and CRP (14 mg/dL). Blood urea nitrogen and serum creatinine concentrations were 114 mg/dL (normal: 8-20 mg/dL) and 5.8 mg/dL (normal: 0.6-1.2 mg/dL), respectively. Computed tomography and sonography showed left pyelonephritis with hydronephrosis. The ultrasonogram of the right kidney showed increased renal parenchymal echogenicity with subtle obliteration of the corticomedullary differentiation, which suggested of chronic kidney disease. The urine culture revealed *Enterococcus faecium*. After percutaneous nephrostomy and appropriate antibiotic therapy, the creatinine level decreased from 5.8 mg/dL to 1.6 mg/dL on the 30th day of admission. During the evaluation of the cause of hydronephrosis in left kidney, ureteral stricture was detected by pelvic magnetic resonance imaging (MRI) and intravenous pyelography. At the 30th day of admission, ureteral stricture was relieved partially. But we could not remove percutaneous nephrostomy because of recurrent pyelonephritis while clamping the drainage of PCN. At the 50th day of admission, we performed ante-grade pyelography and confirmed full recovery of ureteral stricture, and then removed PCN.

**Conclusion:** Percutaneous nephrostomy and appropriate antibiotic therapy could be a good treatment options, in case of acute kidney injury associated acute pyelonephritis caused by segmental ureteritis.

**Key Words:** 요관 협착, 급성신우신염

Ureteral stricture, Acute pyelonephritis