

안지오텐신 수용체 차단제에 의해 감추어진 레닌 분비 증양

부산대학교 의학전문대학원 내과학교실

김민정, 김일영, 이동원, 이수봉, 신민지, 이하린, 양병윤, 송상현, 성은영, 곽임수

A Case of Reninoma Masked by Angiotensin Receptor Blocker

Min Jung Kim, Il Young Kim, Dong Won Lee, Soo Bong Lee, Min Ji Shin, Harin Rhee
Byeong Yun Yang, Sang Heon Song, Eun Young Seong, Ihm Soo Kwak

Pusan National University School of Medicine Department of Internal Medicine

A 33-year-old pregnant female with high blood pressure and proteinuria referred to Pusan National University Yangsan Hospital. Although she was evaluated for secondary cause of hypertension 5 years ago, the results showed no abnormality. Despite of intensive medical treatment, her blood pressure was not controlled and proteinuria was worsened, then termination of pregnancy was done at 20 weeks of gestation. After discharge, her blood pressure was well controlled and proteinuria was improved with use of calcium channel blocker and angiotensin receptor blocker (ARB) in outpatient clinic for 6months. The ARB was stopped for her planning of pregnancy and hypokalemia was observed after discontinuation of ARB. Plasma renin activity (55.9 ng/ml; normal, 0.2-2.8 ng/ml/h) and aldosterone (537.2 pg/mL; normal, 40-310 pg/mL) was markedly elevated. Abdomen CT showed enhanced round mass at the right kidney. Right partial nephrectomy was performed on the patient. The histologic findings confirmed a diagnosis of reninoma. The patient's blood pressure and serum potassium remained normal after surgery. The diagnosis of reninoma might be delayed in patients taking ARB because ARB masked hypokalemia caused by reninoma.

Key Words: 고혈압, 저칼륨혈증, 레닌분비증양
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