

복막투석 환자에서 발생한 월경과다증을 동반한 자발성 신파열의 1례

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A Case of Spontaneous Renal Rupture with Hypermenorrhea in a Patient on Continuous Ambulatory Peritoneal Dialysis

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Non-traumatic spontaneous renal rupture on continuous ambulatory peritoneal dialysis (CAPD) is a very rare event. In most case, it is associated with acquired cystic kidney disease or the presence of renal cell carcinoma. Also, dialysis patients have a tendency to bleed because of platelet dysfunction. A 27-years old nulliparous woman presented with 2-3 month history of hypermenorrhea and 10 years history of CAPD by end-stage renal disease due to chronic glomerulonephritis. She was admitted to hospital due to an episode of hypermenorrhea accompanied by severe left flank pain without any traumatic event. Abdominal CT scan shows that a large amount of hematoma of left kidney and retroperitoneal space. Renal arteriographic findings show no active bleeding focus. After 7days, follow-up CT scans shows bilateral hemothorax and laboratory findings was disseminated intravascular coagulation (DIC) features. Heparin free daily hemodialysis, conjugate estrogen, desmopressin, packed red blood and cryoprecipitate transfusion were performed. She was recovered and re-started the CAPD. In present report, we describe a case of DIC caused by hypermenorrhea after spontaneous renal rupture in a CAPD patient with acquired cystic kidney disease.

Key Words: 복막투석, 과다월경, 신파열

CAPD, Hypermenorrhea, Renal rupture