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The long-term effect of transcatheter arterial embolization on kidney volume reduction in patients with autosomal dominant polycystic kidney disease

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Background: Nephromegaly is a serious problem in patients with autosomal dominant polycystic kidney disease (ADPKD) even after dialysis treatment has begun. Renal transcatheter arterial embolization (TAE) can reduce kidney volume (KV), however its effectiveness varies widely and the long-term effect on total KV reduction remains unknown.
Methods: We report three cases of hemodialysis patients with ADPKD who had severe abdominal distension due to polycystic kidneys. They underwent renal TAE with ethanol and were examined 81, 57 and 17 months after TAE. TAE was performed in one kidney because urine output was over >500mL per day in all three patients. Because KV of the other kidney increased during the follow up period in all three patients, TAE was then performed in the other kidney.
Results: Patients experienced relief from abdominal distension within one month after TAE. As measured by computed tomography, KV of polycystic kidneys decreased substantially after renal TAE.
Conclusion: Significant KV reduction occurs during the first year after TAE and more slowly thereafter.

Keywords: ADPKD, hemodialysis, TAE