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Clinical Nephrology

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A Case of Subcapsular Hematoma from Renal Artery Pseudoaneurysm rupture in a Patient with Acute Pyelonephritis

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Background:

Renal artery pseudoaneurysm (RAP) is a rare disease that generally caused by vascular injury. Previously reported causes of RAP were abdominal trauma or surgery, kidney biopsy, arteriosclerosis, uncontrolled high blood pressure, and idiopathy. Meanwhile, the correlation between acute pyelonephritis (APN) and RAP is unclear, and subcapsular hematoma (SCH) as a complication of RAP has not been reported previously in Korea. We report a first case of rupture of RAP inducing SCH in a patient with APN.

A 50-year-old woman was hospitalized with high fever, chilling and left flank pain. Clinical symptoms and laboratory findings suggested the presence of urinary tract infection, and initial computed tomography revealed left APN without RAP. Antibiotic was administered intravenously to the patient; then, fever and left flank pain gradually subsided. Blood and urine culture revealed the growth of extended-spectrum β -lactamase-positive *Escherichia coli*. On hospital day 5, the patient complained of sudden severe left flank pain. A small pseudoaneurysm (0.6cm diameter) on a branch of upper polar renal artery and a SCH in left kidney were seen on computed tomography (CT) and angiography. After angiographic embolization was performed, the flank pain disappeared. On follow-up CT taken 7 days later, hematoma was still observed and percutaneous drain was inserted. And there was no evidence of growth of bacteria in the dark red blood drained from the hematoma. The patient was asymptomatic at 2 months follow up, and the hematoma almost disappeared on CT scan.

Methods: .

Results: .

Conclusion: .

Keywords: Acute pyelonephritis, Renal artery pseudoaneurysm, Subcapsular hematoma