

시술자에 따른 경피적 신생검의 안전성 및 사구체 수집률 비교

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정성진 · 고은실 · 황현철 · 김형욱 · 박철휘 · 김용수 · 장윤식 · 신석준

Percutaneous Renal Biopsy: A Comparison of Complications and Glomerular Yield between Nephrologists and Radiologists

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Introduction: Although percutaneous renal biopsy remains an essential tool in the diagnosis and treatment of renal disease, in current times many non-nephrologists have taken a stronghold on the procedure. The present study assessed for the differences in post-biopsy complications and specimen adequacy between biopsies performed by nephrologist and by ultrasound expert radiologist

Methods: This study included 387 ultrasound-guided percutaneous native renal biopsies performed by nephrologists or radiologists from 2005 to 2010.

Results: During the study period, 170 biopsies were performed by nephrologists and 217 biopsies were performed by radiologists. The number of post-biopsy complications such as gross hematuria, perirenal hematoma, pain, infection, significant bleeding requiring intervention or blood transfusion and additional hospitalization was similar in both groups. The average glomerular numbers in biopsies performed by nephrologists and performed by radiologists were 28 ± 17 and 20 ± 12 , respectively ($p < 0.001$).

Conclusion: Despite there is no difference in the number of post-biopsy complications between groups, this study shows that biopsies performed by nephrologists get more sufficient specimens than those by radiologists. These findings suggest that percutaneous renal biopsy performed by nephrologists may be not inferior to that performed by ultrasound expert radiologists.

Key Words: 신생검, 합병증, 사구체 수집률

Percutaneous Renal biopsy, Complication, Yield