

폐뇨성 급성 신부전과 심낭 유출액

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Pericardial Effusion Leading to Oliguric Acute Renal Failure

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We describe a 84-year-old patient who developed oliguric acute renal failure secondary to massive pericardial effusion. He was referred to our emergency room due to progressive dyspnea and azotemia. Electrocardiogram showed normal sinus rhythm. A two-dimensional echocardiogram confirmed the presence of severe pericardial effusion without prominent right ventricular diastolic collapse. Laboratory finding showed that his BUN and serum creatinine level was 91.8 mg/dL and 3.77 mg/dL respectively. Renal ultrasonography did not show presence of urine in his bladder and any sign of hydronephrosis. Urine output was not increased by saline infusion, but immediately increased after pericardiocentesis with drainage. His renal function was completely restored 3 days after procedure. Pericardial biopsy demonstrated the invasion of malignant cells. We should keep in mind that severe pericardial effusion is one cause of oliguric acute renal failure.

Key Words: 폐뇨성 급성 신부전, 심낭 유출액

Pericardial effusion, Oliguric acute renal failure