INTERNATIONAL JOURNAL OF INNOVATIVE RESEARCH & DEVELOPMENT

ISSN: 2278 – 0211 (Online)

A Case Of Renal Angiomyolipoma

Dr. D.N. Kundra
P.G. Resident, General Surgery, NKPSIMS & LMH, Nagpur, India
Dr. M. Akhtar
Professor & HOD, General Surgery ,NKPSIMS & LMH, Nagpur, India
Dr. D. Saxena
Lecturer, General Surgery, NKPSIMS & LMH, Nagpur, India
Dr. M. Zaki
P.G. Resident, General Surger, NKPSIMS & LMH, Nagpur, India
Dr. A. Kulkarni
Senior Resident, General Surgery, NKPSIMS & LMH, Nagpur, India

Abstract:
Angiomyolipoma is a benign renal tumor that tends to grow with time We report a case of giant renal angiomyolipoma treated with complete nephreouretrectomy.
A 55-year-old woman presented with abdominal lump since 2yrs . Subsequent computed tomography scan of the abdomen showed large well circumscribed mainly fat attenuated round lesion in left side of abdomen suggestive of a large exophytic left renal angiomyolipoma with left hydroureteronephrosis .
Decision to proceed with nephrouretrectomy was taken because of the risk of spontaneous bleeding, the tumor size, and the patient's symptoms. The patient underwent successful left total nepherouretrectomy. The mass grossly measured 25 × 18 x 12 cms and weighed 6.5 kgs . To the best of our knowledge, this is the largest angiomyolipoma treated with total nepherouretrectomy surgery to date.

1.Introduction
Angiomyolipoma is a benign renal tumor that tends to grow with time and can be associated with complications, such as hemorrhage and pain, requiring active intervention. We report a case of giant renal angiomyolipoma *treated with* complete nephreouretrectomy without complications.

2.Case Details
A 55-year-old woman presented with abdominal lump since 2yrs and abdominal discomfort with distention of 3 months' duration. There was no history suggestive of TCS(Tuberous sclerosis complex)Physical examination revealed benign vital signs and a palpable mass in the right loin extending to the hypochondriac region. The findings of the routine blood investigation were within normal limits, with a creatinine of 1.1 mg/dL. Ultrasonography revealed an echogenic mass occurring from the right kidney. A subsequent computed tomography scan of the abdomen showed large well circumscribed mainly fat attenuated round lesion in left side of abdomen suggestive of a large exophytic left renal angiomyolipoma with left hydroureteronephrosis (Fig. 1). The radiological appearance were suggestive of an isolated angiomyolipoma.

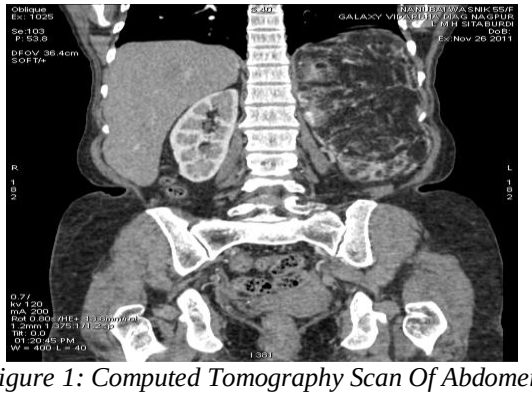

Figure 1: Computed Tomography Scan Of Abdomen
Showing Complex Mass Displacing Right Kidney And Adjacent Structures

A decision to proceed with nephrouretrectomy was taken because of the risk of spontaneous bleeding, the tumor size, and the patient's symptoms. The patient underwent successful left total nepherouretrectomy. Total nephreouretrectomy was performed using a midline incision. The mass grossly measured 25 × 18 cm (Fig. 2), and weighed 6.5 kgs .

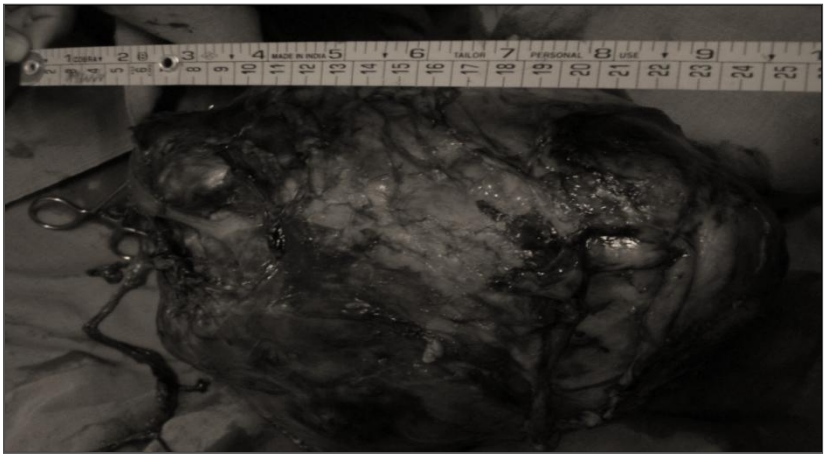

Figure 2: Photograph Of Huge Tumor Mass After Resection

The histopathologic findings were consistent with angiomyolipoma.Post operative recovery was smooth and renal function was preserved with a creatinine of 1.2 mg/dL postoperatively. To the best of our knowledge, this is the largest angiomyolipoma treated with total nepherouretrectomy surgery to date.

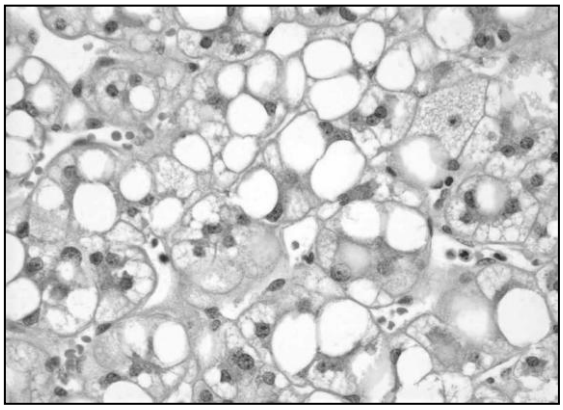

Figure 3: Histological Appearance Of Tumor

3.Discussion

Angiomyolipoma is a benign clonal neoplasm consisting of varying amounts of mature adipose tissue, smooth muscle, and thick-walled vessels. This tumor type, is found in 0.3% of all autopsies and in 0.13% of the population screened Renal AMLs occupy 1-3% of renal tumors and occur in 2 clinical spectrums: sporadic
and those associated with TSC[3].TSC is an autosomal disease entity with various characteristics such as mental retardation, adenoma sebaceum, seizure, renal manifestations . [4]
Although AML is uncommon among the general population,
previous studies has shown that 20% of patients withTSC are known to develop AML while more than 50% of AMLs are associated with TSC.7 . [5]
This case was peculiar due to rarity of disease and huge size of the tumor .

4.Conflict Of Interest

The authors declare no conflict of interest whatsoever arising out of the publication of this manuscript."

5.References

1. Singla A, Arudra S, Bharti N . Giant Sporadic Renal Angiomyolipoma Treated With Nephron-sparing Surgery.Urology Volume 74, Issue 2 August 2009
2. 2.Wein: Campbell-Walsh Urology, 9th ed. chapter 47 - Benign Renal Tumors
3. 3 Steiner MS, Goldman SM, Fishman EK, Marshall FF. The natural history of renal angiomyolipoma. J Urol 1993;150:1782-6.
4. 4 Nelson CP, Sanda MG. Contemporary diagnosis and management
5. of renal angiomyolipoma. J Urol 2002;168:1315-25.