

Images in medicine

Exceptional intrarenal pseudomembranous

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We report the case of a 51-year-old patient, known as hypertensive and type 2 diabetic, admitted to emergency for acute pyelonephritis. She suffered from low back pain in a feverish context. A Uro-scanner showed the presence of a 12mm pyelic renal calculus and an calycal calculus of 6mm diameter responsible for a moderate dilation of left pyelocalictic cavities. First, we performed drainage with a double J probe. Then, in a second step, the left ureteroscopy allowed partial laser fragmentation. The presence of a suspect soft magma prompted us to stop the procedure. After performing a hydatid serology that has returned negative, a laparoscopic left pyelotomy allowed the progressive externalization of the suspect magma. It presented with a greenish, fibrinous, semi-solid shell completely molding the pylon and the pyelocalicelles cavities. The introduction of the flexible cystoscope through a trocar at the end of the procedure allowed us to check the complete cleaning of the excretory cavities. The anatomopathological study is back in favor of a weakly eosinophilic acellular material with some polyhedral crystals and some inflammatory elements. There were no signs of malignancy. The

patient did not present any postoperative complication and did not present a recurrence.

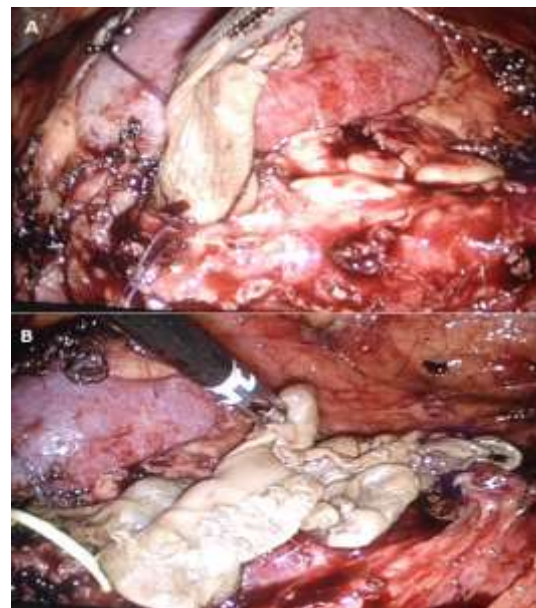


Figure 1: A) extraction of the pseudomembranous from the kidney; B) final aspect of the pseudomembranous