

Images in clinical medicine



Case of congenital ureteropelvic junction obstructive nephrolithiasis with acute urinary retention X-ray abdomen (KUB view)

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Case of congenital ureteropelvic junction Obstructive nephrolithiasis with acute urinary retention X-ray abdomen (KUB view)

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Image in medicine

A 36-year-old male patient was brought to casualty with complaints of colicky left sided flank pain, nausea, hematuria and difficulty in urination since 3 months. The patient came with no passage of urine since last 12 hours and sudden onset of pain. Per abdomen examination reveals tenderness at costovertebral angle with tachycardia and tachypnea. Patient was advised for X-ray abdomen KUB. Large left calculus in lower calyx with hydronephrosis as shown in (A) with mild tenderness over left flank. Catheterization was done. The patient was further advised for routine blood investigations, renal ultrasound, urine examination. The emergency surgery decision was taken on next day. Open

pyelolithotomy with anderson-hynes pyeloplasty under general anesthesia was done. Post operatively patient was managed by Inj. Ceftriaxone 700 mg IV 12 hourly, Inj. Gentamycin 60 mg IV 8 hourly, Inj. Pantoprazole 40 mg IV 12 hourly and Inj. Neomol 1g IV 8 hourly. Liquid tolerated diet was advised to patient on post-operative day 2. Patient suggested to take very low calcium diet. After 7 days, patient's vitals were

normal and shifted to normal diet and oral medication. The patient was advised to increase liquid diet and water intake. The final diagnosis was congenital ureteropelvic junction obstructive large (2.6 cm) nephrolithiasis with acute urinary retention, while the differentials included renal cell carcinoma, renal vein thrombosis, polycystic kidney disease.



Figure 1: AP view X-ray showing large obstructive left calculus in lower calyx with hydronephrosis