

Adult with A Primary Refluxing Megaureter

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Clinical image

We report the case of a 47 year old without drugs allergies and hypertension, presented to the emergency department with symptoms of low back pain about 3 weeks of evolution, together for 48 hours of oliguria and fever.

We made a blood test which showed a creatinine of 1.8, exploration evidenced a sense of mass in the left flank, before which it was decided to perform an ultrasound, showing a left hemiretroperitoneo multicystic mass, with Diagnostic possibilities one cystic lymphangioma or primary megaureter.

Given these findings, the Emergency contact and decide Urology performance of CT scan, which reports the presence of a mass of 29 cm in length occupying the left retroperitoneal, septate, and continuity to the renal pelvis, without displaying the left ureter, posing as a diagnostic possibility left primary megaureter with a dual system in the kidney of the same side, draining the upper pole moiety megaureter (Figures 1 & 2).



Figure 1: CT scan.



Figure 2: CT scan.

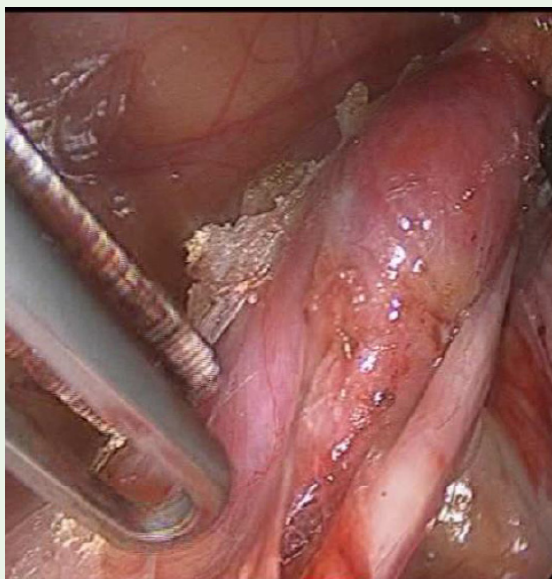


Figure 3: Laparoscopy.

We decided percutaneous drainage mass, obtaining yellowish liquid sent for analysis, with results of urine.

After the diagnosis of obstructive primary left Megaureter we made a laparoscopy surgery, with approach transperitoneal and mass was exposed (Figure 3).

It progresses resection cranial and caudal defunctionalized upper pole moiety for clamping the distal end of megaureter, running the uneventful postoperative. Currently the patient is asymptomatic and without urological clinic.