

Blunt renal trauma-blessing in disguise?

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Author Affiliation:
Montreal, Quebec.

Authors:
Chopra P; St-Vil D; Yazbeck S

Abstract:
PURPOSE: The purpose of this study was to quantify pathologic lesions of the kidney found incidentally during the workup of a blunt renal trauma. METHODS: A retrospective review of the medical records of 103 patients ages 0 to 18 years with blunt renal injuries admitted to a level 1 pediatric trauma center between January 1, 1991 and December 31, 1999 was performed. All patients underwent ultrasonography and Doppler of their renal vessels. Additional investigations with computed tomography (CT) scan, cystography, or nuclear medicine functional studies were performed as indicated. RESULTS: Coexisting urogenital lesions were identified in 13 of 103 (12.6%) patients reviewed, and 7 (54%) required surgical treatment. The majority of the patients (9 of 13, 69%) suffered minimal trauma. All patients presented with **gross hematuria** as their main symptom. Stenosis of the uretero-pelvic junction was the most frequent diagnosis (n = 7): 3 patients required uretero-pyeloplasty, and 3 required nephrectomy. Two heterogeneous renal masses were discovered in which the diagnosis of a malignant process could not be eliminated; elective resection and open biopsy were performed. The

diagnoses of multicystic kidney and solitary cyst with complex hematoma, respectively, were confirmed on pathology. Grade III ureterovesical reflux with pyelonephritis (n = 1), polycystic kidney (n = 1), extrarenal pelvis without obstruction (n = 1), and horseshoe kidney (n = 1) were the other lesions discovered. **CONCLUSIONS:** Pathologic lesions of the urinary tract are uncommon; however, they may complicate an otherwise negligible renal trauma. The diagnostic and therapeutic approach to blunt renal trauma must be modified in these cases. A high index of suspicion must be maintained when a patient presents with **gross hematuria** with a minimal force blunt abdominal trauma. Copyright 2002, Elsevier Science (USA). All rights reserved.

Major Subjects:

- Kidney / abnormalities / * injuries / radiography / ultrasonography
- Wounds, Nonpenetrating / complications / * diagnosis

Additional Subjects:

- Adolescent
- **Child**
- **Child**, Preschool
- Female
- Follow-Up Studies
- Hematuria / etiology
- Humans
- Male
- Retrospective Studies
- Tomography, X-Ray Computed

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