A Complication After Percutaneous Nephrolithotomy

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CASE PRESENTATION

A 24-year-old woman with left renal pelvis and lower calyceal stones was admitted for percutaneous nephrolithotomy (PCNL) (Figure 1).

The surgery was uneventful. Nephrostomy tube and ureteral stent were removed on the 2^{nd} postoperative day. Soon after, urine leakage from the site of the nephrostomy tube and fever developed. Temperature was as high as 39°C and leukocytosis up to 20 000/mm³, with neutrophils as the dominant part (80%), was reported.

Double J stent was inserted through ureteroscope. On the 3rd postoperative day, the patient showed signs and symptoms of obstipation, vomiting, abdominal tenderness and rebound tenderness, and high fever. Plain abdominal x-ray at supine and upright position revealed air fluid level and no evidence of gas pattern in the pelvis (rectum) and sentinel loop in the left upper quadrant (Figure 2). Chest x-ray revealed pleural effusion in both sides (Figure 3).

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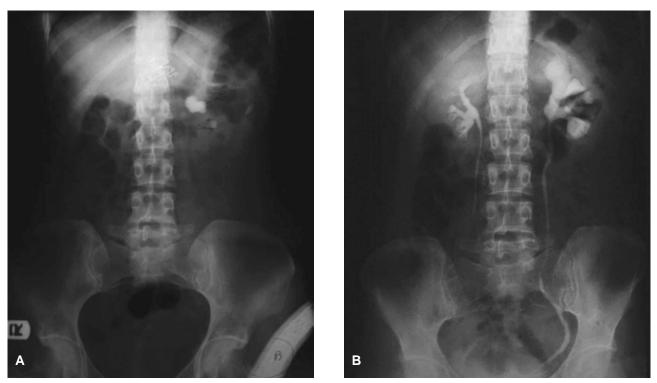


Figure 1. Intravenous urography demonstrates a 3-cm stone in the left kidney.

Clinical Pathology Case



Figure 2. Plain Abdominal radiography shows multiple air fluid level patterns and empty pelvic cavity.

QUIZ

What could be the possible cause of the abdominal pain and obstipation?

What is your suggestion as the next step of diagnosis and treatment?

The answers will be discussed in the next issue of Urology Journal.



Figure 3. Chest x-ray reveals bilateral pleural effusion.