

# A Rare Case of Spontaneous Rupture of a Renal Angiomyolipoma in a Post-Partum Patient

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## **Abstract:**

A 26 year female, postoperative cesarean section day 2, presented with sudden onset pain in left loin and abdominal distension with hematuria referred from peripheral rural hospital with unstable hemodynamics. After resuscitation, evaluated with CT scan Abdomen Pelvis (P+C) and found to have left sided large renal ruptured hemorrhagic mass with gross hemoperitoneum. Emergency Exploratory Laparotomy done and left sided renal hemorrhagic mass removed with nephrectomy. Post-op period uneventful. Histopathological study has diagnosed it as Renal Angiomyolipoma which is a rare case to present like this in postpartum female.

**Keywords:** Postpartum, Hematuria, Hemoperitoneum, Laparotomy, Angiomyolipoma.

## **1. Introduction**

A 28-year-old primigravida post cesarean section at 36 week of gestation in a rural setup. On day 2, patient started complaining of sudden onset left flank pain radiating to the back associated abdominal distension and hematuria. Referred to our hospital on same day.

## **Clinical Case**

### **O/E:**

- Patient conscious, oriented
- GC guarded, cold extremities
- BP- 80 mm Hg systolic, Pulse -120/min, feeble
- Hematuria +
- P/A: distension +, Tenderness+, Guarding +
- BS: absent

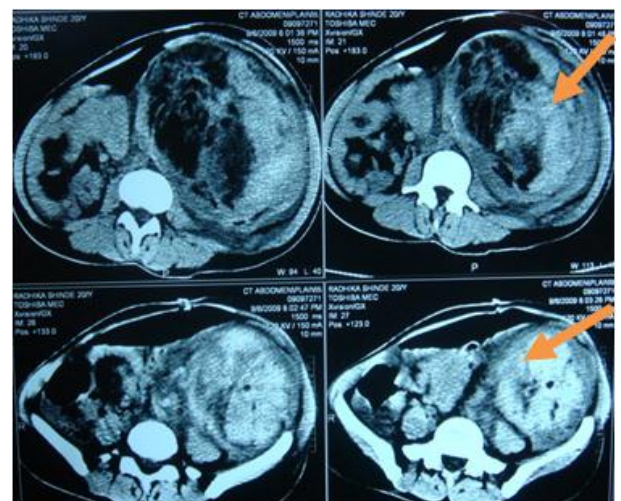
**Abdominal CT scan:** large mass with fat and blood vessels and most likely to be angiomyolipoma in the upper pole of the left kidney extravasation of contrast in the peritoneal cavity suggestive of recent bleeding? rupture

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**Figure 1: CT abdomen showing renal mass**

## **2. Treatment:**

- Hemodynamic stabilization with crystalloids and blood transfusion.
- Exploratory laparotomy after stabilization in two hours.
- E/o tumor ruptured in the peritoneal cavity causing haemoperitoneum.
- Tumor arising from upper pole of left kidney.
- Nephrectomy done along with tumor excision.

### 3. Intra-op Findings:

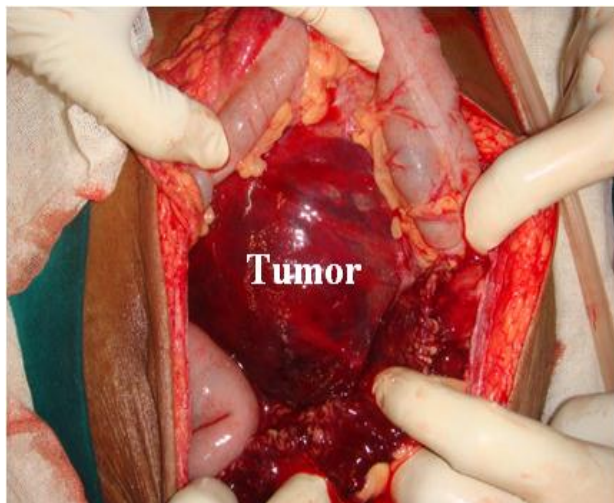


Fig.2: Renal hemorrhagic tumor

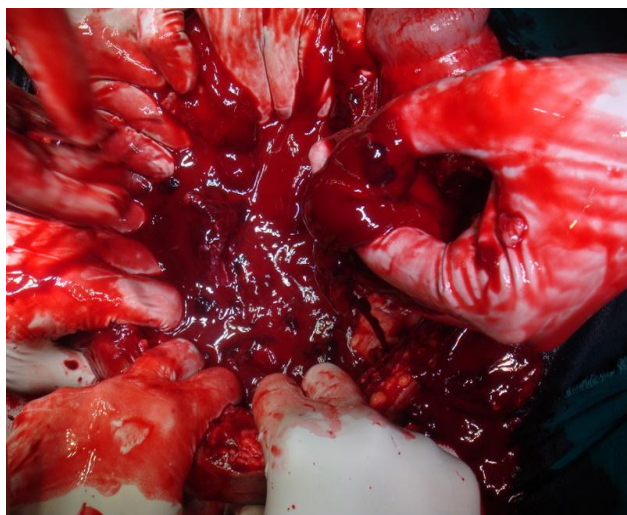


Fig.3: Ruptured tumor in the peritoneal cavity

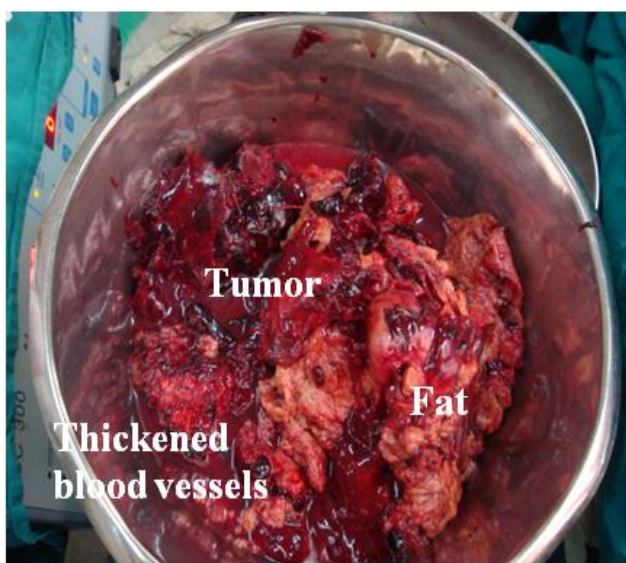


Fig.4: Specimen showing fat and thickened blood vessels

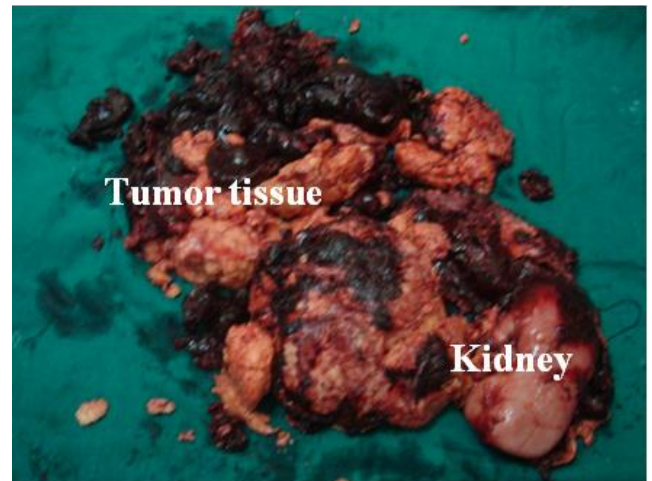


Fig.5: Left Kidney with tumor at the superior pole

### 4. Histopathology Study:

The tumor mass composed of abnormal thick walled blood vessels, smooth muscle and adipose elements consistent with the diagnosis of **Angiomyolipoma**.

**Post-op course was uneventful and patient underwent complete recovery.**

### 5. Discussion:

- Angiomyolipoma is a rare, benign renal neoplasm composed of fat, vascular, and smooth muscle elements with an incidence of about 0.3-3%.
- Sporadically (80%) or in association with a **Tuberous Sclerosis complex (Bourneville-Pringle-disease)** (20%).
- More common in females and on right side.
- Majority (60%) of angiomyolipomas are asymptomatic.
- Symptomatic cases most commonly present due to intratumoral or retroperitoneal hemorrhage.
- **Lenk's triad**, consisting of abdominal pain, flank mass, and signs of internal haemorrhage.
- **Spontaneous renal haemorrhage is an uncommon condition and is even rarer when the bleeding is in the peritoneal cavity, as the kidney usually bleeds in the retroperitoneal space (Wunderlich Syndrome)**
- The first case of spontaneous renal rupture into the peritoneal cavity presenting as an acute abdomen was described by Pode et al in 1985.
- **To our knowledge, less than ten previous cases have been reported.**
- **The most common causes are angiomyolipoma and renal cell carcinoma.**
- **Thus our case represents one of the rare presentations of spontaneous post-partum rupture of renal angiomyolipoma.**

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