Case 8187

Eurorad ••

Bilateral double renal pelvis with partial ureteral duplication complicated with unilateral ureteral and renal lithiasis

Published on 23.02.2010

DOI: 10.1594/EURORAD/CASE.8187 ISSN: 1563-4086 Section: Uroradiology & genital male imaging Case Type: Clinical Cases Authors: Carmen Salvan 1,2,3, Paul Lazar 2, Doru Munteanu 2, Silviu Draghici 2, Andrei Lebovici 2, Elena Nastasa1,3 , Daniel Dreptate 2,3, Rodica Suciu 3, Anca George2 1) Praxis Medical SRL, 2) Hiperdia SA, 3) Spitalul Judetean de Urgenta, Bistrita, Romania. Patient: 41 years, female

Clinical History:

A 41 year old female presented for a routine abdominal ultrasound, having no complaints. **Imaging Findings:**

The female patient presented 8 years ago lumbar pain, without pathological findings at ultrasound and radiography. At the time being, ultrasound revealed a deep cortical band in the right kidney, suggesting a double pelvis. The upper part of the left kidney had a normal appearance (normal parenchymal index). However, the middle and the lower part presented a grade 3 hydronephrosis (Fig. 1a), with dilatation of the proximal ureter (lumbar part) (Fig. 1b) as well as an echogenic focus of 22 mm with shadow in the lower calyces suggesting renal lithiasis (Fig. 1a), but also a similar focus of 16 mm in the lumbar ureter, concluding as ureteral lithiasis (Fig. 1b). Subsequently, a simple renal radiography was done; just the ureteral lithiasis was proven (Fig. 2). CT urography (with native (Fig. 3), secretory (Fig. 4) and excretory phase (Fig. 5)) for detecting lithiasis and for opacification of the collecting system was performed for preoperatory functional renal status and revealed a normal left upper renal pole (Fig. 3a, b, 4 a, d), bilateral double pelvis (Fig. 5a,b), bilateral partial ureteral duplication (Fig. 3b-e, 4 b-d) and the presumed double the renal pelvis (Fig. 5 a, b), and showed the maintained excretory function of both (whole) kidneys (Fig. 5a-c). **Discussion:**

Bilateral renoureteral malformations are rare entities, especially in woman, being first mentioned in anatomical dissections [1], found in the operating room and later proven in IV urography examinations as well as on CT urography [2-7]. Double renal pelvis predispose to complications, mainly hydronephrosis and urolithiasis (3,5). Associations with partial ureteral duplication are increasing the risk for nephrolithiasis and ureteral lithiasis as well as for pionephrosis, with impaired outcome for the patient [7-9]. Ultrasound is a good initial diagnostic tool in patients with suspected lithiasis, including ureteral lithiasis, but has a limited role in characterizing certain anatomical abnormalities [4, 10, 11]. And cannot evaluate the functional status of the kidneys. Subsequently, IV urography has this potential, but CT urography is better demonstrating all types of lithiasis, location, size measurements, characteristics, and secretory as well as excretory function, urinary flow dynamics of the kidneys, degree of obstruction, with implications in selecting the best treatment option [2, 6, 10]. Finally, the radiologist should answer 3

questions regarding the presence of lithiasis, the necessity of treatment and the best treatment strategy [2, 12]. **Differential Diagnosis List:** Bilateral double renal pelvis. Partial ureteral duplication. Unilateral reno-ureteral lithiasis

Final Diagnosis: Bilateral double renal pelvis. Partial ureteral duplication. Unilateral reno-ureteral lithiasis

References:

Asakawa M, Kubodera T, Okamura Y, Habara K, Ito H. Five cases of the double renal pelvis and ureter. Kaibogaku Zasshi. 1989 Jun;64(3):206-9. (PMID: <u>2801015</u>)

Joffre F, Otal P, Soulie M. Radiological imaging of the ureter. Cap.5 Ureteral lithiasis and other intraluminal diseases. Spinger Ed. Berlin.Heidelberg 2003: 101-118.

Gawlik-Jakubczak T, Moszczy?ski W, Darczy?ski M, Krajka K. Giant hydronephrosis of the upper left kidney in the case of complete, one-sided double pelvis. Przegl Lek. 2006;63(5):306-8. (PMID: 17036512)

Keskin S, Erdo?an N, Kurt A, Tan S, Ipek A. Bilateral partial ureteral duplication with double collecting system in horseshoe kidney. Adv Med Sci. 2009 Oct 29:1-3. (PMID: 19875357)

Inamoto K, Tanaka S, Takemura K, Ikoma F. Duplication of the renal pelvis and ureter: associated anomalies and pathological conditions. Radiat Med. 1983 Jan-Mar;1(1):55-64. (PMID: <u>6679897</u>)

McNicholas MM, Raptopoulos VD, Schwartz RK, Sheiman RG, Zormpala A, Prassopoulos PK, Ernst RD, Pearlman JD. Excretory phase CT urography for opacification of the urinary collecting system. AJR Am J Roentgenol. 1998 May;170(5):1261-7.PMID: 9574598.

Pilcher LS. Kidney with double pelvis and double ureter: Nephrolithiasis; Pyonephrosis: Nephrectomy. Ann Surg. 1917 May;65(5):534-7. (PMID: <u>17863703</u>)

Fern?ndez Rodr?guez A, Arrabal Mart?n M, Mij?n Ortiz JL, Palao Yago F, Zuluaga G?mez A. Renoureteral malformation and lithiasis. Therapeutic approach. Arch Esp Urol. 2000 Mar;53(2):116-22. (PMID:<u>10802917</u>) Sevilla CR, Sanz MA, Manzanera JL, Stanek Z, Mart?n JA. Pseudocoraliform lithiasis in kidney with double incomplete excretory system and double megaureter; Actas Urol Esp. 2009 Jun;33(6):722. PMID: 19711764. Karami H, Arbab AH, Hosseini SJ, Razzaghi MR, Simaei NR. Impacted upper-ureteral calculi >1 cm: blind access and totally tubeless percutaneous antegrade removal or retrograde approach? J Endourol. 2006 Sep;20(9):616-9. (PMID: <u>16999610</u>)

Park SJ, Yi BH, Lee HK, Kim YH, Kim GJ, Kim HC. Evaluation of Patients With Suspected Ureteral Calculi Using Sonography as an Initial Diagnostic Tool. How Can We Improve Diagnostic Accuracy? J Ultrasound Med 2008: 27:1441-1450. (PMID: <u>18809954</u>)

Tiselius HG, Ackermann D, Alken P, Buck C, Conort P, Gallucci M; Working Party on Lithiasis, European Association of Urology. Guidelines on urolithiasis. Eur Urol. 2001 Oct;40(4):362-71. (PMID: <u>11713390</u>)



Description: Renal lithiasis with hydronephrosis Origin:



Description: Ureteral lithiasis with dilatation of the proximal ureter Origin:



Description: Left paravertebral radiodense opacity suggesting the ureteral lithiasis seen in ultrasound **Origin:**



Description: Bilateral normal upper pole kidney **Origin:**



Description: Hydronephrosis on the left Origin:



Description: Left renal lithiasis and ureteral lithiasis, with hydroureter **Origin:**



Description: Left renal lithiasis Origin:



Description: Left ureteral lithiasis and hydronephrosis Origin:



Description: Preserved, normal secretory function for the upper pole of the left kidney **Origin:**



Description: Grade 3 hydronephrosis of the left kidney **Origin:**



Description: Preserved secretory function of the left kidney. Hydronephrosis. Ureteral and renal lithiasis. **Origin:**



Description: Normal secretory function for the upper pole of the left kidney, but grade 3 hydronephrosis with preserved secretory function for the rest of the kidney. **Origin:**



Description: Bilateral double renal pelvis, with preserved excretory function of both kidneys **Origin:**



Description: Bilateral duplication of the lumbar ureter Origin:



Description: Partial duplication of the left ureter Origin:



Description: Partial duplication of the left ureter with joining point **Origin:**



Description: Duplication of the left lumbar part of the ureter with dilatation of one **Origin:**



Description: Duplication of the left lumbar part of the ureter with dilatation of one **Origin:**



Description: Partial duplication of the left ureter with joining point **Origin:**



Description: Just one ureter is seen on the left, on the right side the duplication is still present, the joining point being lower (not shown) **Origin:**