

中文題目：浸潤性腎細胞癌以漸進式腎臟病變與雙腎不等大為表現之個案報告

英文題目：Infiltrative renal cell carcinoma involved in kidney presented with progressive renal dysfunction and renal asymmetry-case report

作者：陳伯定¹ 陳呈旭¹ 徐佳鈿¹

服務單位：¹ 台中榮總內科部腎臟科

Introduction

Renal cell carcinoma (RCC) is the most common primary kidney malignancy and comprises 2-3% of all malignant neoplasms. This parenchymal tumor may exhibit a variety of morphologic characteristics and clinical manifestations

Case report

A 56-year-old man is a case of ankylosing spondylitis. He was followed up at our IMRH OPD regularly. However, progressive renal dysfunction was observed and proteinuria was also noted. Thus he was referred to NEPH service. Renal sonogram was arranged and showed bilateral increased echogenicity with renal asymmetry (Lt : 14cm; Rt : 12cm). Lab data revealed WBC= 6450 (μ L), Hb= 11.3(g/dL), Platelet= 220 ($\times 10^3/\mu$ L), BUN/ Cr= 37/2.11 (mg/dL), Na/K = 142/4.7(mEq/L), Albumin/ T.protein=3.7/6.9 (g/dL), LDH= 403 (U/L), GOT/GPT=24/36 U/L, LDL= 79(mg/dL), TG= 136(mg/dL), HbA1c= 6.1, HBsAg: non reactive, anti-HBs: reactive, anti-HBc: reactive, anti-HCV: non reactive, GBM Ab : negative, ANA:Negative, dsDNA Ab: 5.4 WHO Units/mL, ANCA:negative, IgG : 1157 mg/dL, IgA : 311.5 mg/dL, IgM : 120.4 mg/dL, Free Ig κ : 342 mg/dL, Free Ig λ : 128 mg/dL, C3 : 142.7 mg/dl, C4 : 30.4 mg/dl. Urine routine = protein : trace, OB : 1+, Protein/Creatinine (UPCR) 1209.42 (mg/g). MRI revealed no difference between in-phase and out-phase gradient echo T1W1. There is water restriction on ADC/DWI

Renal biopsy of left kidney was arranged and showed papillary renal cell carcinoma, type II. Then he started Sunitinib therapy. Follow-up renal function revealed improvement