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ORIGINAL ARTICLE

Non-traumatic spontaneous retroperitoneal bleeding: The effect of an early and accurate diagnosis[☆]



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KEYWORDS

Wunderlich syndrome;
Spontaneous sub-capsular or peri-renal haemorrhage;
Non-traumatic renal haemorrhage;
Abdominal computed tomography scan;
Renal carcinoma

Abstract

Background: Spontaneous sub-capsular or peri-renal haemorrhage (Wunderlich syndrome) is a rare condition that involves a diagnostic challenge. In many cases, bleeding leads to haemodynamic instability that may be life threatening. Therefore, it is important to have a high clinical suspicion for timely action.

Objective: This paper highlights the experience of the Urology Department of the Centro Médico Nacional de Occidente del Instituto Mexicano del Seguro Social.

Material and methods: Retrospective study of consecutive non-randomized sampling. The Emergency Service Registry was reviewed for all admissions from 1 January 2010 to 31 December 2013 to identify patients with non-traumatic spontaneous retroperitoneal haemorrhage. Patient charts were reviewed to determine sex, age, vital signs, laboratory and imaging results, associated diseases, management, and outcomes.

Results: A total of 11 patients met the inclusion criteria for the study. All patients were received in the Emergency Department referred from secondary care hospitals. None of them were referred with a diagnosis of spontaneous retroperitoneal haemorrhage. The diagnosis was made in 100% of patients with abdominal CT scan. All patients received urgent surgical management on the day of admission due to haemodynamic instability. Ten patients underwent

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nephrectomy. Histopathological findings included, among others, angiomyolipoma, renal carcinoma, and metastatic hepatocellular injury.

Conclusions: Spontaneous retroperitoneal haemorrhage is a lethal condition if not detected on time. The abdominal CT scan is the most accurate diagnostic method for detection. Surgical management is necessary in patients with haemodynamic instability.

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PALABRAS CLAVE

Síndrome de Wunderlich;
Hemorragia retroperitoneal espontánea;
Hemorragia retroperitoneal no traumática;
Tomografía computada;
Carcinoma renal

Hemorragia retroperitoneal espontánea no traumática: efecto del diagnóstico preciso y oportuno

Resumen

Antecedentes: La hemorragia subcapsular o perirrenal espontánea (síndrome de Wunderlich) puede condicionar inestabilidad hemodinámica con riesgo para la vida. Es una enfermedad rara que implica un reto diagnóstico; por lo que debe sospecharse su diagnóstico para actuar a tiempo.

Objetivo: Presentar la experiencia adquirida del servicio de Urología de la Unidad Médica de Alta Especialidad del Hospital de Especialidades del Centro Médico Nacional de Occidente del Instituto Mexicano del Seguro Social.

Material y métodos: Estudio retrospectivo con muestreo consecutivo no aleatorizado. Se revisaron los ingresos en el servicio de Urgencias de enero de 2010 a diciembre de 2013 para identificar los casos con diagnóstico de hemorragia retroperitoneal espontánea no traumática. De los expedientes se recabaron los siguientes datos: edad, sexo, signos vitales, resultados de laboratorio, métodos de diagnóstico por imagen, enfermedades asociadas, tratamiento y pronóstico.

Resultados: Un total de 11 pacientes cumplieron los criterios de inclusión. Todos los pacientes fueron recibidos en el servicio de Urgencias, y referidos de hospitales de segundo nivel. El diagnóstico se realizó en el 100% de los pacientes con tomografía computada abdominal. Todos los pacientes recibieron tratamiento quirúrgico urgente el día de la admisión debido a la inestabilidad hemodinámica; a 10 se les realizó nefrectomía; los hallazgos histopatológicos incluyeron angiomiolipomas, carcinoma renal y lesión metastásica de hepatocarcinoma, entre otras.

Conclusiones: La hemorragia retroperitoneal espontánea es una entidad patológica letal si no se detecta a tiempo. La tomografía computada es el método diagnóstico más preciso para su detección. El tratamiento quirúrgico es indispensable en pacientes con inestabilidad hemodinámica.

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Background

Spontaneous sub-capsular or perirenal haemorrhage is a relatively rare pathologic entity and hard to diagnose.¹ In 1856, Wunderlich described for the first time the clinical features of spontaneous renal haemorrhage characterised by the low blood flow effect in the sub-capsular or perinephric cavity.² The definitive treatment is indicated when the retroperitoneal haemorrhage conditions haemodynamic instability and the need for haemotransfusion in the patient. After the acute episode is resolved, other therapies are recommended for the purposes of preventing recurrent bleeding and the specific treatment.^{1,3} Most commonly reported aetiologies are: renal cell carcinoma and angiomyolipoma; less common causes include: autoimmune, vascular, infectious diseases, use of anticoagulants, adrenal carcinoma, adrenal myelolipoma and chronic renal failure.³⁻⁷

Retroperitoneal haemorrhage may be fatal for the patient if not diagnosed in time. There should be a high suspicion index, since there are other diseases which may have the same symptomatology.

Objective: review the experience of the Urology service as regards patients treated with diagnosis of spontaneous retroperitoneal haemorrhage admitted into the casualty department at Hospital de Especialidades Centro Médico Nacional de Occidente del Instituto Mexicano del Seguro Social, for the purposes of showing statistical data, prognosis, morbidity and mortality, as well as the applied treatment.

Material and methods

Retrospective study with consecutive non-randomised sampling. The database was reviewed (IMSS VISTA) for the

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