

Difficulties in the diagnosis of adrenal pathology are due to the large size of the tumors (5-10 cm). This fact present a correlation discrepancy topographical and sintotopic.

Case presentation: 59-year-old patient presenting to a physician for a routine medical check-up. Ultrasound determined in the left hypochondrium, in the projection of the spleen hill, a volume formation with dimensions 8,7x8,5 cm. CT scan with intravenous contrast detected the presence of a volume formation in the stomach fundus projection, irregular density contours, moderate contrast capture, heterogeneous structure, with density characteristic for adipose tissue that compresses the stomach from the outside. In the left adrenal gland, are determined two nodular formations separated by a trabecula, which have the same contrast intensity. The dimensions of the adrenal tumors are 34.5x47x26.5 mm and 103x95x95 mm. From the personal pathological antecedents, gastric ulcer complicated with haemorrhage, was subjected to surgical treatment by the BII resection 15 years ago. Laboratory data do not detect pathological deviations

Management and results: The presence of the volume formation identified by USG and CT was interpolated as a primitive retroperitoneal tumor. The patient underwent surgical treatment: excision of the retroperitoneal formation in block with the spleen. The surgical specimen was subjected to the histopathological examination, the morphopathological result revealing the presence of unstructured necrotic masses, areas with haemorrhage zones and tissue structure characteristic of adrenal glands

Conclusion: Unilateral necrosis of the adrenal is an extremely rare disease, and its diagnosis can only be post-operative based on the histopathological examination.

Key words: tumor, necrosis, adrenal gland

NEFROSTOMIA PERCUTANATĂ ECOGHIDATĂ PRIN TROACAR – INDICAȚII ȘI EFICACITATE



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Introducere: Nefrostomia percutanată ecoghidată (NPC) este o procedură intervențională minim-invasivă utilizată pentru decompresia sistemului pielo-caliceal renal. În 1955, Goodwin, a publicat un raport care descrie această procedură. Uropatia obstructivă este o afecțiune întâlnită frecvent în tumorile organelor bazinului mic și constituie aprox. 25% în structura maladiilor oncologice. NPC se poate efectua prin 2 metode:

- clasică
- prin trocar (unimomentană) TrNPC

Material și metode: Lotul de studiu a constituit 50 pacienți, tratați în perioada 2016-2019 în departamentul de urologie a IMSP IO, cărora le-au fost aplicate 70 de TrNPC. Metoda a fost implementată cu succes, iar materialul publicat este propria experiență.

Rezultate: Instrumentarul utilizat: ecograful și sonda abdominală cu ghidaj, set de nefrostomie, trocar N9 Fr. Din lotul constituit, femeii au fost - 37 (74%) și - 14 (28%) bărbați, vârsta medie fiind de 62 ani. Dintre aceștia, 28 (56%) – bolnavi la prima adresare, 22 (44%) – adresare repetată. Indicațiile pentru TrNPC: pacienții cu tumori avansate ale bazinului mic cu diferite grade de hidronefroză. TrNPC s-au instalat: pe stânga la 19 pacienți, pe dreapta 15, iar 18 pacienți bilateral. În dependență de stadiul tumoral: stadiul I - 2(4%), stadiul II – 3(6%), stadiul III-IV - 45 (90%). Pentru pacienții cu stadiile I – II de boală, indicațiile către TrNPC a servit: traumatismul iatrogen intraoperator sau strictura anastomozei uretero-intestinale postoperatorii. Complicații întâlnite: hemoragie difuză – 2(4%), dislocația drenului cu reinstalarea acestuia 3(6%).

Concluzii:

- 1.TrNPC este o metoda unimomentană mult mai efectivă și sigură în drenarea obstrucțiilor infra renale în compație cu NPC clasică.
2. Având complicații minime TrNPC poate fi efectuată în condiții de ambulatoriu.

Cuvinte cheie: Nefrostomia percutanată ecoghidată; Tumorile organelor bazinului mic

THE ULTRASONICALLY GUIDED PERCUTANEOUS NEPHROSTOMY BY TROCAR – THE INDICATIONS AND EFFICACY

Background: Ultrasound-guided percutaneous nephrostomy (PNE) is a minimally invasive method used to decompress the renal pyelocalcal system. Goodwin in 1955 published a report describing this procedure. Obstructive uropathy is a common disease founded in pelvic organ tumors and constitutes - 25% of all oncological diseases. PNE can be performed by 2 methods:

- classic (multiple maneuvers)
- by trocar (unimoment method)

Methods and materials: The study group consists of 50 patients treated during the 2016-2019 period in the urology department of the IMSP IO, 70 TrPNEs being applied. The method was successfully implemented and the material is own experience.

Results: The used instruments: ultrasound scan, abdominal guided catheter, nephrostomy set, trocar N9 Fr. Of the patients group, women were - 37 (74%), men were - 14 (28%), the mean age was 62 years. From them 28 (56%) were first addressed patients and 22 (44%) were patients at secondary address. The TrPNEs indications were: advanced pelvic tumors with clinical manifested hidronefroze. Were performed TrPNE: on the left at 19 patients, on the right at 15 patients, bilateral at 18 patients. The tumor grade: I degree – 2 (4%), II degree – 3 (6%), III – IV degree – 45 (90%). For the I – II degree the TrPNEs indication was the iatrogenic trauma or the ureter-intestinal anastomose stricture. The procedural complications: diffuse haemorrhage – 2 (4%), PNE tube complications 3 (6%).

Conclusions:

- 1.TrPNE it is a more effective and safely unimoment method used for the infrarenal obstructions then the classic method.
2. TrPNE has minimal complications, also it is possible to use the procedure in ambulatory conditions.

Keywords: Ultrasound-guided percutaneous nephrostomy; Pelvic organ tumors