The Seventh Sickle Cell Nephropathy

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**Key words:** renal medullary carcinoma, sickle cell nephropathy

(Intern Med 49: 2641, 2010)

(DOI: 10.2169/internalmedicine.49.4479)

A 32-year-old African-American man with sickle cell sickle-hemoglobin C disease was admitted with cough and abdominal pain of 2 weeks. Initial evaluation was suggestive of acute vasoocclusive crisis. On further evaluation, computed tomography of the abdomen (Picture A, B) showed an enlarged heterogeneous right kidney (black arrows), loss of normal sinus fat, and numerous lymph nodes within the fascia of gerota (orange arrows) suggestive of an infiltrating neoplasm. Numerous abdominal lymph nodes (small black arrows) are also seen.

Further work-up revealed numerous pleural and pulmonary nodules. Subsequently, pleural biopsy showed poorly differentiated metastatic carcinoma with sickled red blood cells. Immunohistochemistry confirmed the diagnosis of renal medullary carcinoma (RMC).

RMC is a rare aggressive neoplasm termed the seventh sickle cell nephropathy by Davis et al (1), in 1995. Most of the cases reported are young African-American males with sickle cell trait (2). Median survival is less than 3 months.

**References**