Giant Retroperitoneal Abscess Following Extracorporeal Shock Wave Lithotripsy

Chian-Ze Peng^{1,2} and Chorng-Kuang How^{1,2}

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Picture 1.

Picture 2.

Picture 3.

A 45-year-old previously healthy woman presented to our ED with a 1-month history of left flank pain and fever after undergoing extracorporeal shock wave lithotripsy (ESWL). Upon an examination, she was found to have a large ecchymotic mass in the left flank area with severe tenderness (Picture 1). Abdominal CT demonstrated a very large, lobulated mass containing fluid and measuring more than 20 cm in length with rim enhancement within the left psoas and iliacus muscle and also involving the lower pole of the left kidney and peri-/pararenal space, subsequently displacing the left kidney anteriorly and causing mild hydronephrosis (Picture 2, 3).

The formation of an abscess as a complication of ESWL is rare. Bacteria arising from the fragmented stone or entering by way of infected urine are thought to cause abscess formation by lodging in the damaged tissue and/or extravasated blood or urine (1).

In this case, a culture of the aspirated pus revealed *Citrobacter koseri*. Percutaneous drainage combined with antibiotic therapy resulted in full a recovery.

¹Emergency Department, Taipei Veterans General Hospital, Taiwan and ²Department of Emergency Medicine, National Yang-Ming University School of Medicine, Taiwan

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Correspondence to Dr. Chian-Ze Peng, cyberhunter700403@yahoo.com.tw

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Reference

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