Unilateral Renal Cystic Disease with an Impaired Renal Function

Yoshitaka Maeda, Hidetoshi Fukui, Hidetaka Tomida and Tamaki Kuyama

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Picture.

A 71-year-old man was referred to our hospital due to renal failure with type 1 diabetes mellitus. Although he did not have retinopathy, neuropathy, or peripheral edema, his BUN and serum Cr levels were elevated to 31 and 1.84 mg/dL, respectively, along with moderate proteinuria (1.62 g/day). Abdominal CT revealed multiple cysts, similar to

autosomal dominant polycystic kidney disease (ADPKD), restricted in the right kidney (Picture). The contralateral left kidney showed only a mild atrophic change without any cysts. Unilateral renal cystic disease (URCD) was first proposed by Levine (1), and similar cases have been internationally reported. However, the mechanism of unilateral

cystogenesis has not yet been clarified. URCD is generally a non-familial and non-progressive disorder contrary to ADPKD (2). The present case had no family history of kidney disease and no concurrent problems appeared in ADPKD, however, his renal function had deteriorated. Concurrent diabetes mellitus might have led to the impaired renal function in this case.

The authors state that they have no Conflict of Interest (COI).

References

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