



CLINICAL IMAGE IN GASTROENTEROLOGY

Polycystic liver disease with no renal involvement[☆]



Poliquistosis hepática sin afectación renal

G. Méndez*, M. López, L. Llambí

Department of Internal Medicine, Clínica Médica "A", Hospital de Clínicas Dr. Manuel Quintela, Faculty of Medicine, Universidad de la República, Montevideo, Uruguay

A 70-year-old man could provide no personal or family medical history. He sought medical attention for abdominal distension and symmetrical non-gravitational lower limb edema that he had presented with for many years, accompanied with anorexia and early satiety. Physical examination revealed protein-caloric malnutrition and jaundice of the skin and mucosae. There was a large, hard, non-painful, polylobular abdominal tumor in the right hypochondrium. The lower limbs presented with edema extending to the upper thigh that was nonpainful, with no fluxive signs. Abdominal computed tomography (CT) scan identified heterogeneous hepatomegaly and plain-looking multiple cysts substituting almost the entire parenchyma. One of them was compressing the vena cava and another had a hemorrhagic content. There were no elements of portal hypertension. The kidneys were normal. Medical treatment with nutritional

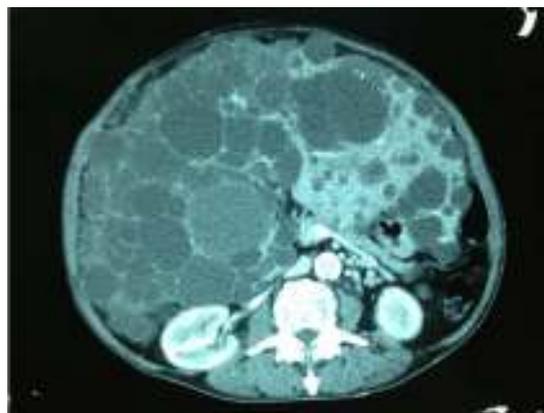


Figure 1 Multiple hepatic cysts, one of which was hemorrhagic.

[☆] Please cite this article as: Méndez G, López M, Llambí L. Poliquistosis hepática sin afectación renal. Revista de Gastroenterología de México. 2016;81:51–52.

* Corresponding author. Ex-residente de Medicina Interna, Clínica Médica "A", Hospital de Clínicas Dr. Manuel Quintela, Facultad de Medicina, Universidad de la República, Uruguay. Hospital de Clínicas, Avda. Italia s/n esquina Las Heras, piso 11, 11600, Montevideo, Uruguay. Tel.: +099 500 214.

E-mail address: jgonzalomendez82@gmail.com (G. Méndez).

support and diuretics was given. Liver transplantation or partial hepatic resection were not considered due to the patient's poor general status. A CT-guided transparietal puncture was carried out on the 2 largest cysts, draining a total of 600 cc, and alcohol instillation was done. The patient progressed well, with reduced edema and improved appetite and nutritional status (Figs. 1 and 2).

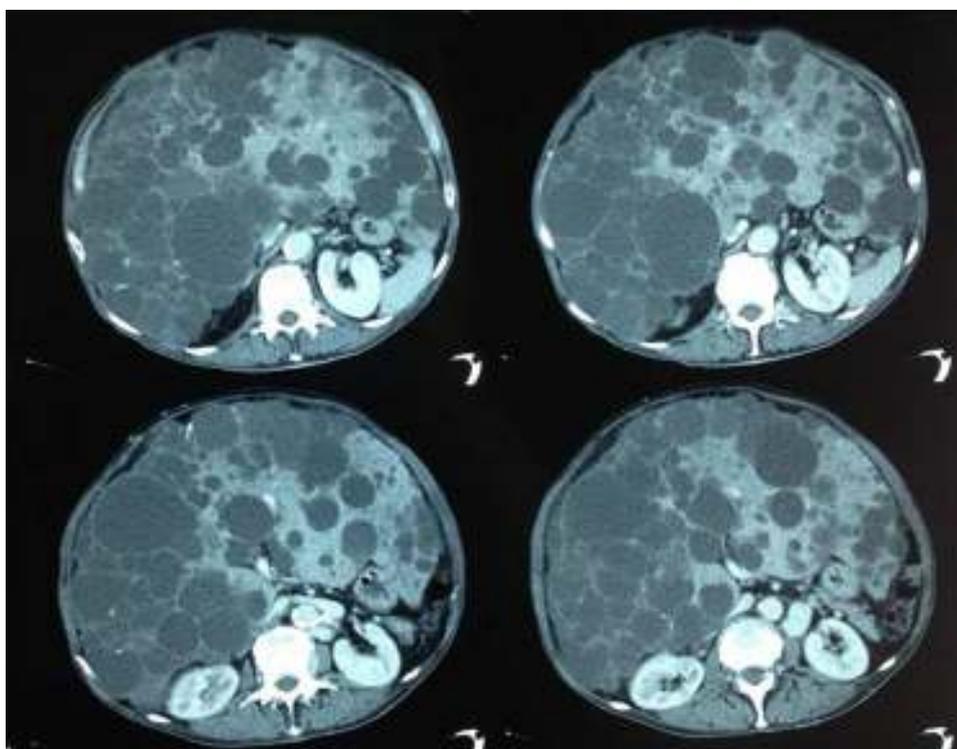


Figure 2 Diffuse hepatic involvement not affecting the kidneys.

Ethical responsibilities

Protection of persons and animals. The authors declare that the procedures followed conformed to the ethical standards of the responsible committee on human experimentation and were in accordance with the World Medical Association and the Declaration of Helsinki.

Data confidentiality. The authors declare that no patient data appear in this article.

Right to privacy and informed consent. The authors declare that no patient data appear in this article.

Financial disclosure

No financial support was received in relation to this study/article.

Conflict of interest

The authors declare that there is no conflict of interest.