Wilms Tumour in Adults

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Summary

Wilms tumour is a congenital disease found exclusively in children under the age of 4 years. Here a case of Wilms tumour in an adult women is described who presented with features of hypernephroma.

Case Report

A newly married girl of 22 years named S.B. was admmitted to Urology ward, Lady Reading Hospital, Peshawar with the compliants of:

- 1. Right sided renal pain (1 year).
- 2. Haematuria and the passage of clots in the urine (1 year).
- 3. Low grade pyrexia (7 days).

On physical examination she was quite healthy with no other possitive finding except bimanually enlarged right kidney, Urine was loaded with RBCs on microscopic examination. Chest X-Ray was normal. Plain skiagram of the abdomen had enlarged renal shadow partly occluded by gases. On IVP, right kidney was non-functioning. Ultrasonographic findings were suggestive of renal neoplasm with complete loss of architecture. Left kidney was normal both on IVP and ultrasound examination. We based our diagnosis upon the above findings and it was labelled as a case of hypernephroma of the right kidney. Nephrectomy was performed by a transperitoneal incision and the kidney with the peri-renal fascia removed. Local lymph nodes were not palpable.

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Cut Section of the specimen revealed that the whole kidney was replaced by the greyish white tumour tissue. Strips of renal tissue could be recognised on one pole.

On histopathological examination there were sheets of oval, rounded and spindle shaped cells with large hyperchromatic nuclei and mitosis. Many bizzare cells were also seen. Stoma was sarcomatoid and at places vascular invasion by the neoplastic cells was also seen. There were areas of haemorrage and necrosis too. The pathologist labelled it Wilms tumour (renal embryoma).

Post-operatively patient had uneventful recovery and was referred to the Institute of Radiotherapy and Nuclear Medicine (IRNUM), Peshwar for further management and instructed to attend the Urology outdoor regularly.

Discussion

Wilms tumour (nephroblastoma, embryoma or adenomyo sarcoma) is highly malignant neoplasm and is exclusively a disease of children under the age of 4 years⁴. It is congenital and arises from embryonal cells trapped in the kidney. It may arise in otherwise normal kidney, or in cystic or horseshoe organ. Its typical presentation is unilateral mass in the flank in infants and children. Haematuria is unusual or very late as it seldom breaks through the pelvis. It may be associated with hypertension and congenital anamolies. It is a solid abdominal neoplasm of infants and young children², but in our case the presentation was totally different from the usual one. The patient was an adult woman and presented with the features of hypernephroma. It was the histo-pathological report on which the diagnosis of embryoma was made. It is very very uncommon in adults; however, 150 cases have been described by Petersen³. Babian has reported 167 adults with hypernephroma in the review of literature¹. It is of great academic importance to find nephroblastoma in adults. We hope that our case may be a useful addition to the literature.

References

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