

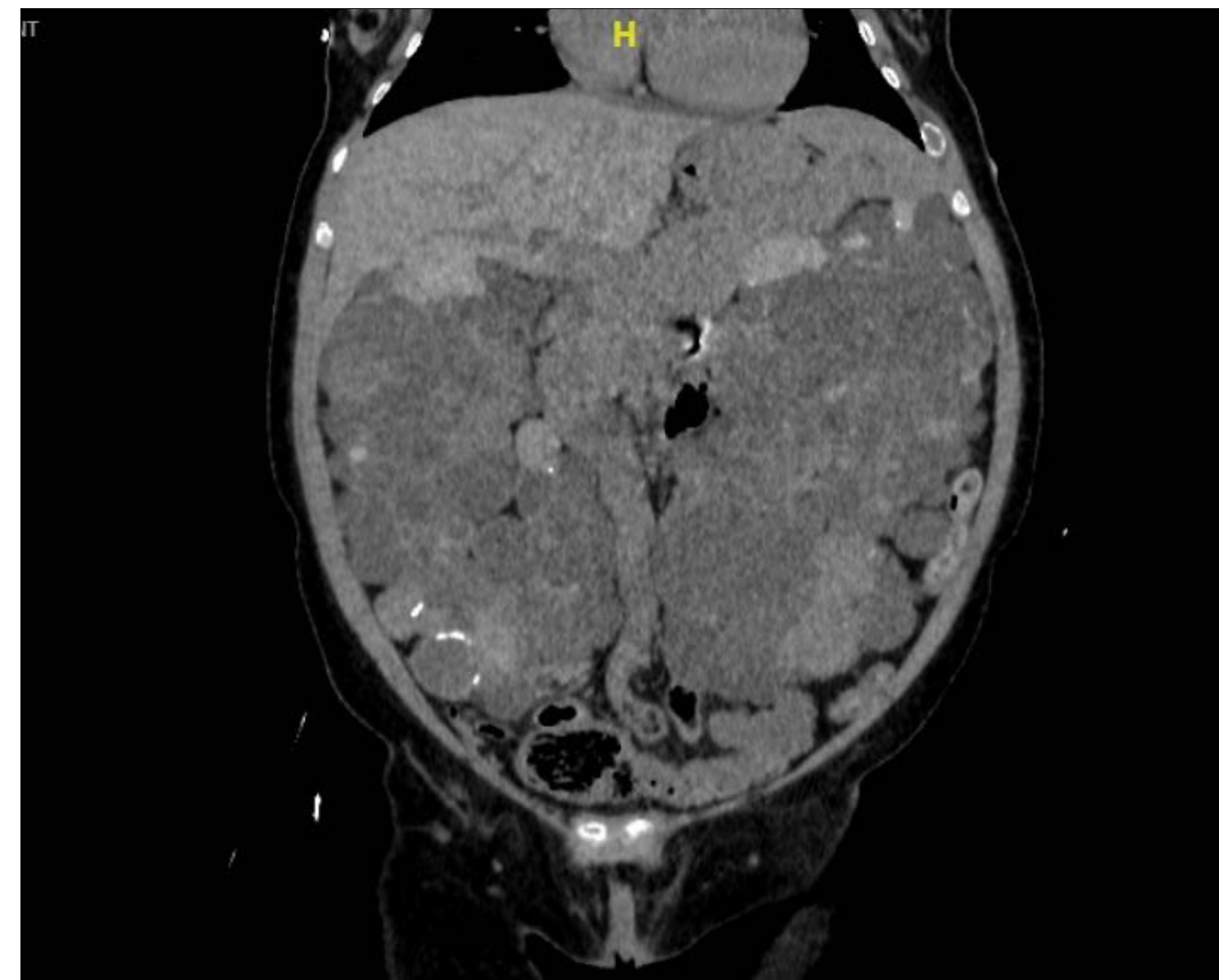


Introduction

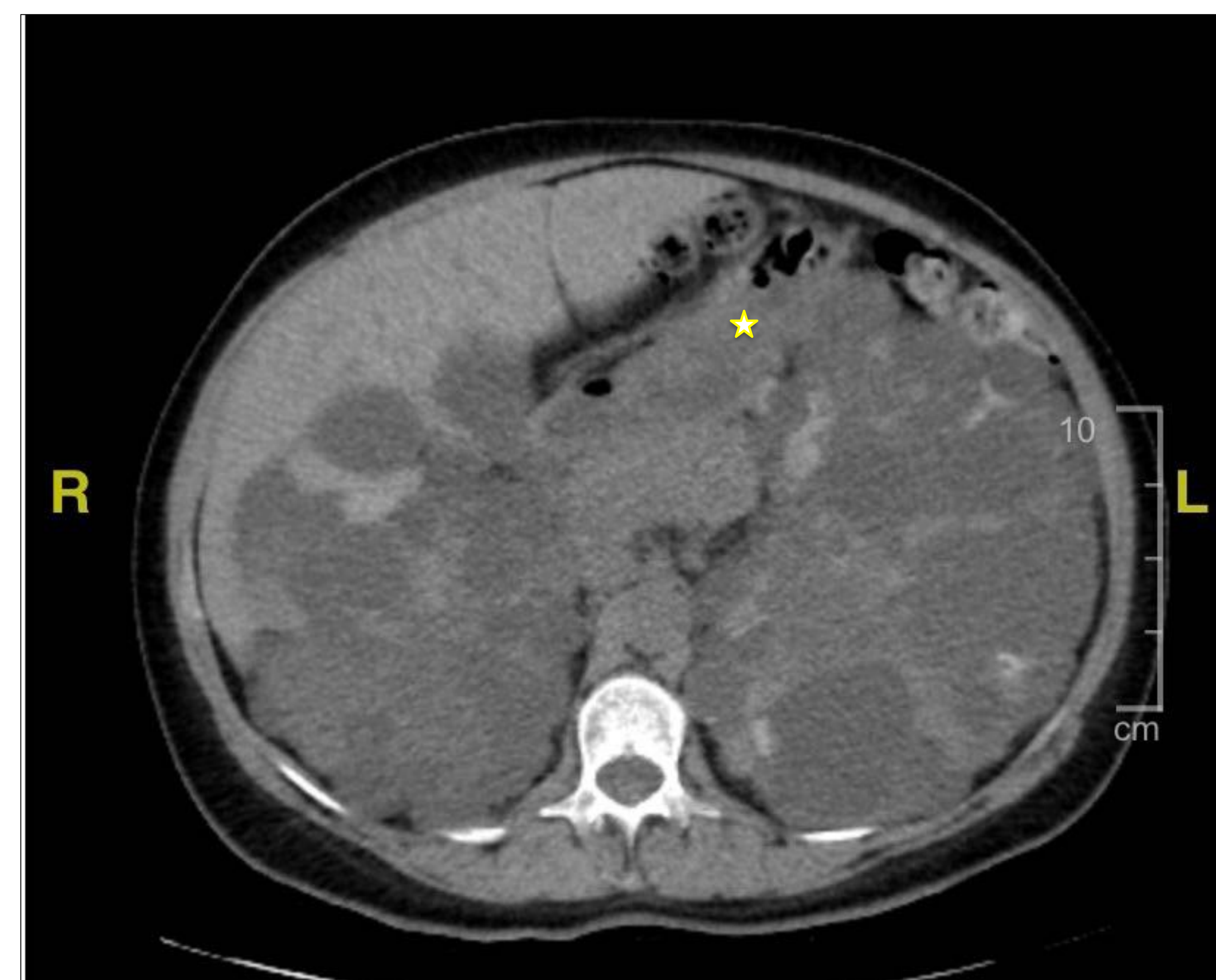
- > Autosomal dominant polycystic kidney disease (ADPKD) is a common inherited disease with incidence of 1 in a 1000 live births
- > Symptoms usually present after 30 years of age with end-stage renal disease by the fifth decade of life
- > Renal cysts enlarge the kidneys and can also form in the liver, pancreas and spleen
- > Extra renal associations: cerebral berry aneurysms, arterial hypertension, heart valve defects and hernias
- > Complications can develop such as extrinsic compression of internal structures
- > We present a case of massively enlarged polycystic kidneys leading to progressive dysphagia mimicking esophageal dysmotility disorder secondary to extrinsic compression of the stomach

Case Description

- > A 43-year old female diagnosed with ADPKD 4 years prior, presented with progressive dysphagia to solids and liquids for 1 month
- > CT abdomen and pelvis showed massively large polycystic kidneys occupying most of the abdominal space, polycystic liver and extrinsic compression of the stomach
- > EGD from a recent prior hospitalization showed esophagitis and biopsy confirmed gastritis
- > GI series showed physiologic pattern of swallowing, no strictures or intrinsic obstruction seen in the esophagus, stomach and duodenum
- > The patient was started on a dysphagia diet which partially controlled her symptoms.
- > Urology was consulted for bilateral nephrectomy



Markedly enlarged polycystic kidneys with mass effect



Extrinsic compression of the stomach by massive polycystic kidneys

Discussion

- > This case reports a rare complication of ADPKD and to the best of our knowledge, this is the first case of massive renal cysts presenting as dysphagia in ADPKD
- > Mass effect symptoms described in literature were leg edema, abdominal fullness or pain, emesis, early satiety, heart failure, arrhythmia, intestinal obstruction and IVC compression.
- > Dysphagia due to extrinsic compression should be considered as a complication of this disease
- > Renal cyst size correlates with degree of renal function and mass effect
- > In such cases, unilateral or bilateral nephrectomy should be strongly considered to decrease morbidity and mortality

References

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