Perirenal Abscess after Recurrent Urinary System Infections

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A 56-year-old woman was brought to the emergency department because of fever, vomiting and mental status change. She had a history of intracranial bleeding eight years ago. She became immobile after the intracranial event. She was feeding through percutaneous enteral gastrostomy and had recurrent urinary system infections attacks. Abdominal CT revealed bilateral multiple renal stones, the biggest was on the right with 3 cm in diameter, severely dilated right renal pelvicalyceal system, nearly 2 cm diameter stone at right ureteropelvic junction level and approximately 7 x 5 cm sized fluid collection at right perirenal space (Figure 1). Perirenal abscess was thought to be the focus of infection and right-sided nephrostomy was inserted. Purulent fluid compatible with abscess was drained. After blood, urine and abscess cultures were collected, ertapenem 1 gram intravenous was started. Extended-spectrum beta-lactamase producing E. Coli grew in urine culture, whereas there was no growth in blood and abscess culture. Ertapenem was continued and she was discharged after two weeks when abscess was completely drained.

A perirenal abscess is a very rare complication of urinary system infections. It should be kept in mind that perirenal abscess can develop secondary to obstructive uropathy in immobile patients who had recurrent urinary system infections [1,2].

DISCLOSURE

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REFERENCES


Figure 1: Right Perirenal Abscess