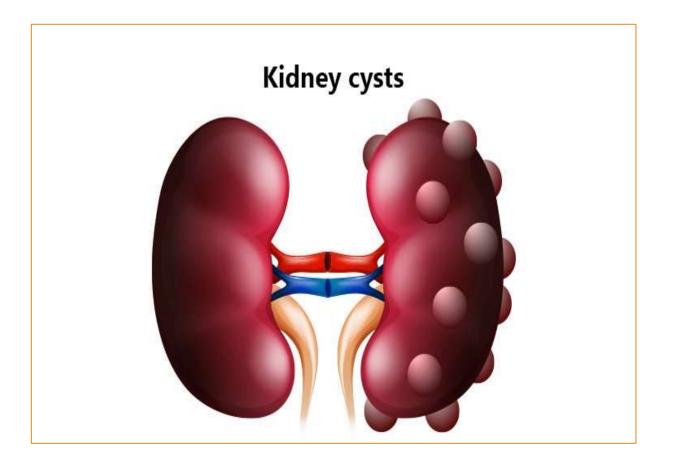


CYSTIC DISEASES of THE KIDNEY

Dr. Nisreen Abu Shahin

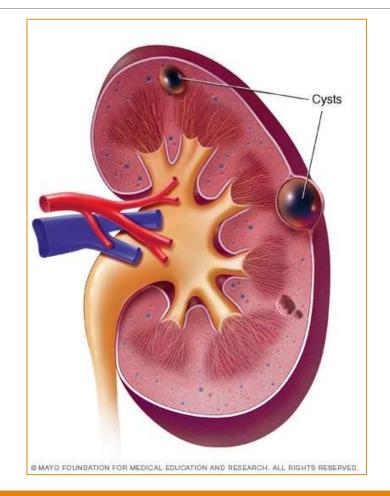


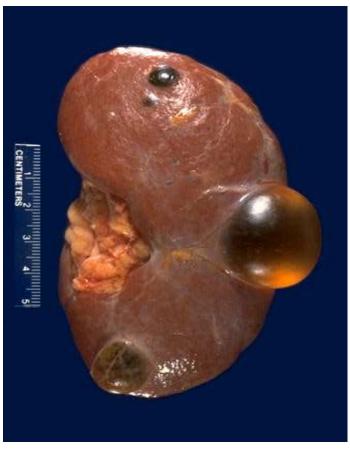
Types of cysts

- 1-Simple Cysts
- 2-Dialysis-associated acquired cysts
- 3-Autosomal Dominant (Adult) Polycystic Kidney Disease
- 4-Autosomal Recessive (Childhood) Polycystic Kidney Disease
- **5-Medullary Cystic Disease**

1- Simple Renal Cysts

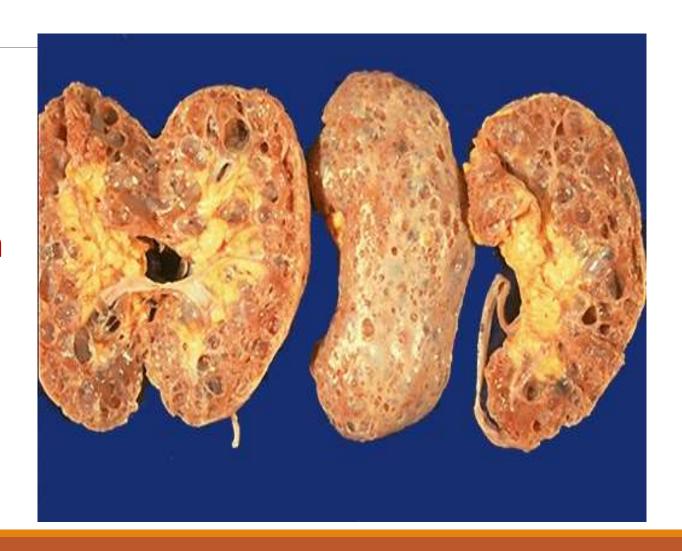
- •Multiple or single
- ■1-5 cm in diameter
- filled with clear fluid.
- confined to the cortex.
- •no clinical significance.
- Usually discovered incidentally or because of hemorrhage and pain
- Importance: to differentiate from kidney tumors





2- Cysts Associated With Chronic Dialysis

- •patients with renal failure who have prolonged dialysis*.
- both cortex and medulla
- Complications: hematuria; pain
- •Increased risk of renal carcinomas (100 times greater than in the general population)**



3- Autosomal Dominant (Adult) Polycystic Kidney Disease

☐ multiple bilateral cysts **Deventually destroy the renal** parenchyma. **☐** Incidence (1: 500-2000) persons \square 10% of chronic renal failure. □inheritance of one of 2 autosomal dominant genes: □(1)- *PKD1*: 85-90% (encodes polycystin-1) **□(2)-** *PKD2* :10-15% (encodes

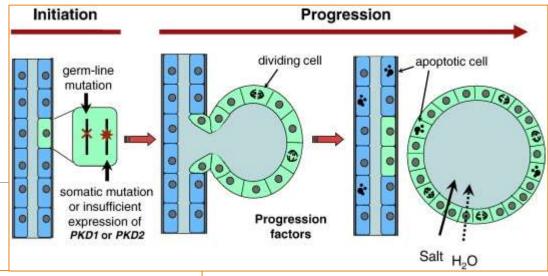
polycystin- 2).





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(Adult) Polycystic Kidney Disease

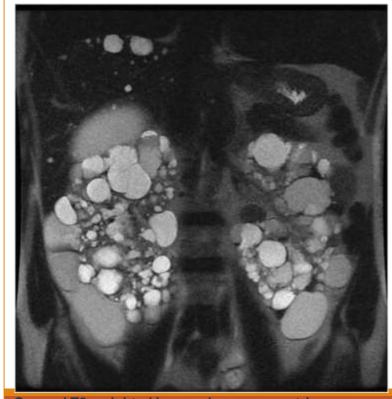


Clinical presentation:

- asymptomatic until the 4th decade
- Symptoms: flank pain, heavy dragging sensation, abdominal mass, hemorrhage, obstruction, Intermittent gross hematuria

Complications

- 1- hypertension (75%)*
- 2- urinary tract infections
- 3- vascular aneurysms of circle of Willis* (10% -30%)→ (subarachnoid hemorrhage).
- 4- renal failure at age 50 (25%; risk increases with age)

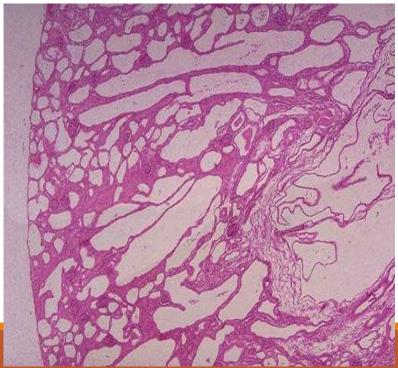


Coronal T2-weighted image shows symmetric enlargement of the kidneys, which contain multiple cysts with variable size

4-Autosomal Recessive (Childhood) Polycystic Kidney Disease

- autosomal recessive
- **♦**1:20,000 live births.
- Types: perinatal, neonatal, infantile, and juvenile.
- Presents early in life
- Associated with <u>liver</u> cysts + hepatic fibrosis
- Mutations in <u>PKHD1</u> gene coding for <u>fibrocystin</u>.
- Fibrocystin may be involved in the function of cilia in tubular epithelial cells.





Normal vs childhood polycystic kidneys

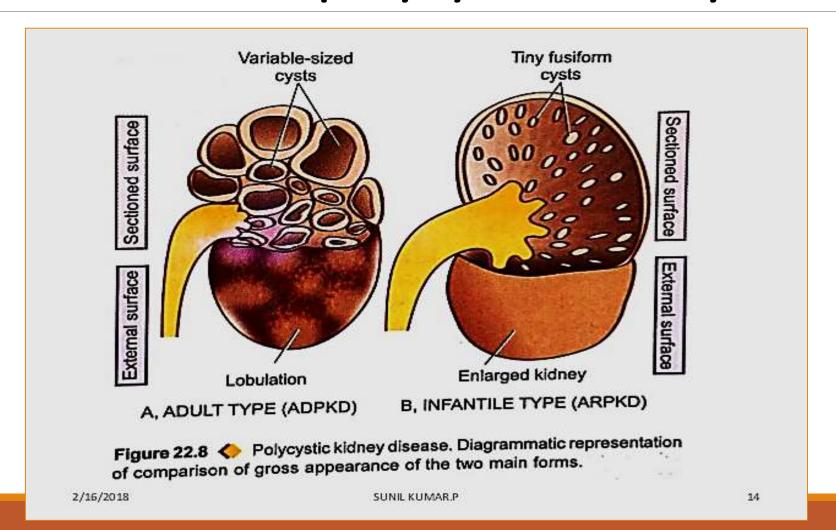
NORMAL TERM INFANT KIDNEYS

CHILDHOOD POLYCYSTIC KIDNEYS





Adult vs childhood polycystic kidney disease

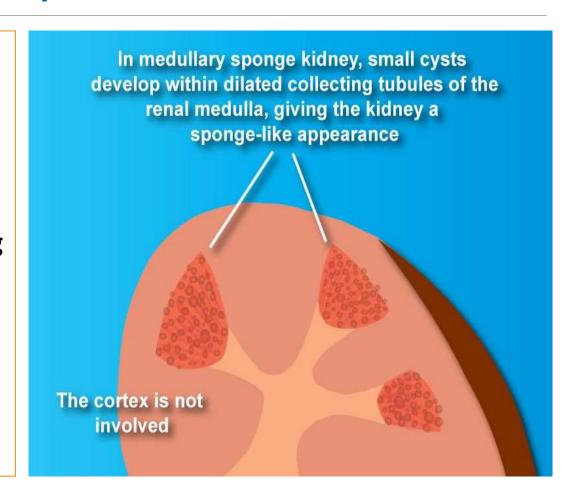


5- Medullary Cystic Disease

2 major types:

1-Medullary sponge kidney

- >A rare nonthreatening condition.
- developmental abnormality characterized by ectatic (dilated) ducts or cystic malformations in the medullary collecting ducts of kidney resulting in medullary cysts.
- Most patients are asymptomatic and the condition may be diagnosed based on incidental findings following radiologic investigation for other reasons.



2-Nephronophthisis-medullary cystic disease complex

- >- almost always associated with renal dysfunction.
- >- usually begins in childhood.
- >- Cysts are at cortico-medullary junction
- ➤ More than 9 gene mutations are described
- All share in common renal histologic triad of tubular basement membrane disintegration, tubular atrophy/ cyst formation, and interstitial fibrosis

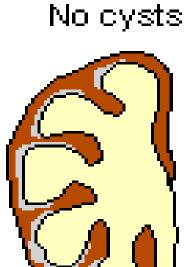


Nephronophthisis-medullary cystic disease complex (medullary- uremic type)

- Clinical features:
- polyuria and polydipsia (↓tubular function).
- renal failure over 5-10-year
- A positive family history and unexplained chronic renal failure in young patients should lead to suspicion of medullary cystic disease.

Kidney Cysts





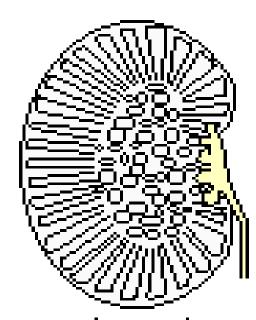
Hydronephrosis is not cysts



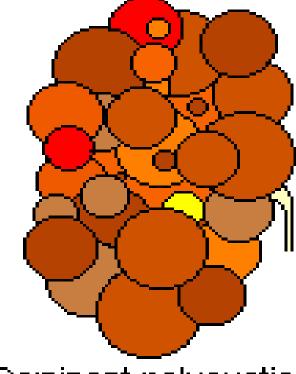
Simple cysts



"Dysplasia"



Recessive polycystic



Dominant polycystic



Medullary sponge



Medullary uremic



Dialysis cystic