Spontaneous perirenal haematoma

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A 35-year-old man presented with 24-hour history of right loin pain. There were no urinary symptoms, no history of trauma, no relevant medical history, and the patient was not on any medications. Clinically he was normotensive, had tachycardia and a fullness in the right flank. Investigations showed haemoglobin of 7.2 g/dl and a computed tomography (CT) scan (figure 1) revealed a right perinephric haematoma. The contralateral kidney was normal and angiography of the right kidney revealed no vascular malformations.

The patient received four units of blood and was managed conservatively. Repeat CT scans after 3 and 12 months showed progressive resolution of the haematoma and preserved renal function on the right side (figures 2 and 3).

Figure 1 CT scan demonstrating right perirenal haematoma

Figure 2 CT scan 3 months later showing resolution of perirenal haematoma

Figure 3 CT scan (focal magnified view) a year later showing almost complete resolution and good right renal cortex

Questions

- 1 What is spontaneous perirenal haematoma also known as?
- 2 What is Lenk's triad?

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Answers

QUESTION 1

Spontaneous perirenal haematoma is also known as Wunderlich's syndrome.

QUESTION 2

Lenk's triad consists of acute lumbar pain, lumbar tumefaction, and symptoms of internal bleeding.

Discussion

Wunderlich's syndrome or spontaneous perirenal haematoma is reported secondary to several causes, the commonest being angiomyolipoma and hypernephroma.¹ It can also be secondary to peri-arteritis, coagulation disorders, and arteriovenous malformations.² Retroperitoneal haemorrhage can present as acute lumbar pain, lumbar tumefaction, and symptoms of internal bleed otherwise known as Lenk's triad.³

Investigative imaging is recommended (CT scan or magnetic resonance imaging (MRI) and angiography). Patients may require emergency

Learning points

- spontaneous perirenal haematoma is usually secondary to angiomyolipoma and hypernephroma
- CT scan or MRI and angiography should be carried out to confirm diagnosis

nephrectomy and haematoma evacuation if they are unstable on conservative management.

To our knowledge, Wunderlich's syndrome has not been reported in the English literature before. In one report, the authors advocated nephrectomy when other causes have been discounted and the contralateral kidney is sound.⁴

Final diagnosis

Primary spontaneous perirenal haematoma.

Keywords: perirenal haematoma; Wunderlich's syndrome; Lenk's triad

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3 Rapp N, Audibert G, Gerbaud P, Grosdidier G. Spontaneous retroperitoneal haematoma: a rare cause of haemorrhagic shock. *Ann Fr Anesth Reanim* 1994;13:853–6.

4 Eres Saez FJ, Sarmentero Ortiz E, Colomer Gonzalez FJ. Wunderlich syndrome: presentation of a case. *Actas Urol Esp* 1989;13:281–2.