

## 後腹腔鏡多囊腎去頂術---病例報告

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### RETROPERITONEOSCOPIC UNROOFING OF POLYCYSTIC KIDNEY DISEASE---CASE REPORT

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**Purpose:** To report a case with polycystic kidney disease underwent retroperitoneoscopic unroofing for the treatment of pain and hypertension.

**Materials and Methods:** This 39-year-old female has suffered from bilateral flank pain and hypertension for about 2 years. She has the family history of polycystic kidney disease. The preoperative evaluation showed elevated plasma renin activity as 16.8 ng/ml/hr. (normal range between 1.31 to 3.95) The ERPF showed 285.83 and 113.20 ml/min of right and left sides respectively. We applied a 30-French double right-angled nephroscope, with a 6 mm working channel, through a 12 mm trocar over bilateral mid-axillary lines and another 5 mm trocar. Unroofing of the renal cyst was performed by electrocauterization or ultrasonic coagulator as adequately as possible.

**Results:** Totally, 90 and 65 cysts of right and left kidney were taken care. Operation time took 5 hours and 20 minutes. Oral intake started on the next day. Post-operative hospital stay was 3 days. The flank pain was improved subjectively. Antihypertensives could be reduced within one year postoperatively as well as the plasma renin activity decreased in 1 and 3 months (14.4 and 6.9 ng/ml/hr) respectively, but elevated again in 12 months (18.1). The ERPF showed 228.66 and 109.5 ml/min of right and left sides respectively 5 months later. The convalescence was uneventful without complication during the 18-month-followup.

**Conclusions:** Retroperitoneoscopic unroofing of polycystic kidney disease showed benefits in improving flank pain but could be helpful for hypertension only within one year in this case. No improvement in ERPF could be identified. However, more experience should be gained to determine if it has the role of prolonging the nature course of the disease.