

Students Interactive learning week 6 Kidney 30 March-3 April

Check your Pathology Department site every Wednesday for the new update of cases

<http://www.medicine.cu.edu.eg/beta/>

General Lecture halls assigned	2, 4, 9
Place	Above MEDC
Time	2.30-4pm

Material

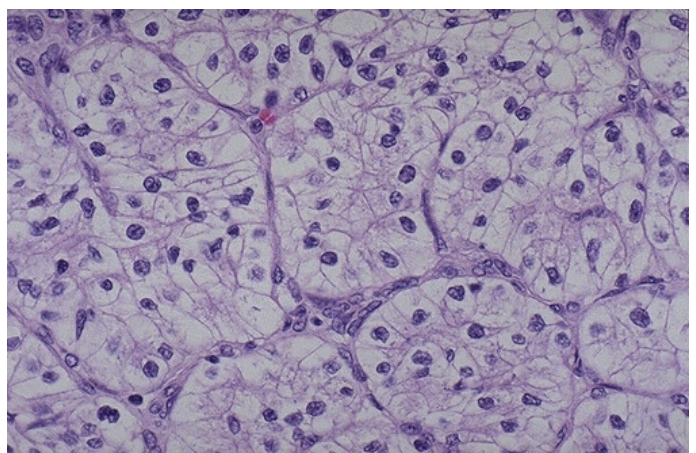
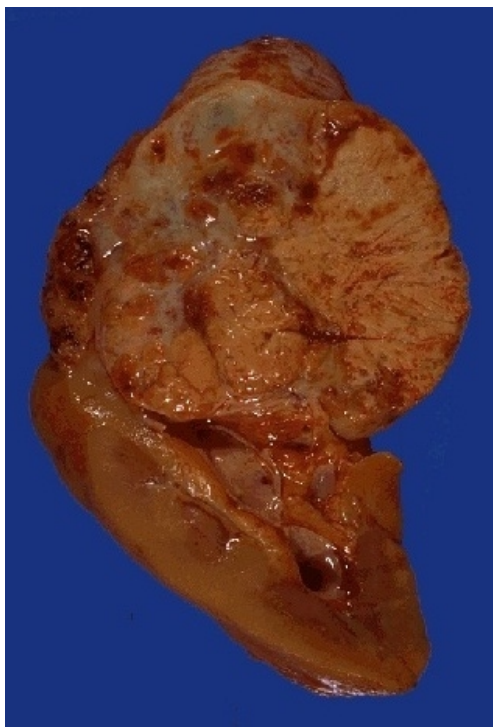
1 Case 20

A 57 year old man presents to his family practitioner, complaining of a dragging sensation in his left loin.

On questioning he admits to have painless haematuria for 3 weeks. Following referral to a urological surgeon, investigations reveal a large mass replacing the kidney. He undergoes a left nephrectomy.

Questions:

- 1- What is the likely diagnosis?
- 2- What are the most common histological patterns of this lesion?
- 3- What will happen if this lesion is left untreated?



2 Clinico-pathological correlations

What pathologic lesion or lesions (up to 3 lesions) are responsible for the following signs and symptoms:

- 1- Congested neck veins
- 2- Cough
- 3- Heartburn
- 4- Tenesmus
- 5- Terminal hematuria
- 6- Oliguria or anuria
- 7- Weight loss

3 General Pathology

Sir Robert Falcon Scott reach's the South Pole on January 17, 1912, barely 1 month after Ronald Amundsen achieves this goal with a more experienced and prepared expeditionary party. Scott's dejected party must now make the long trip back to their base hut they are weak and running low on supplies, and the weather is unusually cold, even for Antarctica. Finally, they can go no further because of severe storms. Months later, a rescue team finds the bodies of the men. All have a hyperkeratotic, papular rash, ecchymoses, and severe gingival swelling with hemorrhages. Which of the following was most likely to be a contributing cause of death in these men?

- (A) Rickets
- (B) Beriberi
- (C) Scurvy
- (D) Kwashiorkor
- (E) Pellagra

4 Special Pathology

A 30-year-old woman with a history of recurrent urinary tract infection, has had a high fever for the past 3 days. On physical examination, her temperature is 38.4C. There is marked abdominal tenderness on deep palpation. A sonogram shows an enlarged right kidney with pelvic and calyceal enlargement and cortical thinning; the left kidney appears normal. A right nephrectomy is performed, and microscopic examination shows inflammatory infiltrates extending from the medulla to the cortex, with tubular destruction and extensive interstitial fibrosis. Lymphocytes, plasma cells, and neutrophils are abundant. Which of the following is most likely to produce these findings?

- (A) Benign nephrosclerosis
- (B) Chronic Pyelonephritis
- (C) Lupus nephritis
- (I) Systemic amyloidosis
- (E) Congestive heart failure
- (F) Autosomal dominant polycystic kidney disease