FIBROEPITHELIAL POLYPS CAUSING URETERAL OBSTRUCTION DIAGNOSED ANTENATELLY

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A 7-year-old boy was referred to National Center for Child Health and Development for the follow-up of the left hydronephrosis diagnosed antenatally. Ultrasonography showed left hydronephrosis (SFU 3) and the dilatation of upper part of the ureter. The diagnosis of the left ureteral stenosis was made by the finding of MAG3 washout renogram and MR Urography. He had no urinary tract symptoms other than diurnal enuresis. Observation in outpatient settings was chosen then. He stated the experience of the left severe intermittent flank pain on his clinical visit 10 months after the first visit. US indicated the presence of ureteral polyp at that time. The operation was undertaken. Retrograde pyelography was performed just before surgery. It showed filling defect in the upper ureter, which we thought was caused by the ureteral polypos. Anterolateral skin incision was made and a retroperitoneal approach was selected for the operation. The long polypoid lesion protruded from the upper ureter to the pelvis when the renal pelvic incision was made intraoperatively. The ureter was excised 2cm long including the part where the neck of the polyp existed and simple pyeloplasty was performed. The postoperative course was uneventful. Pathological examination revealed the polyp had urothelial epithelium on the fibrotic stroma that was consistent with fibroepithelial polyp. This case implies the fibroepithelial polyp might cause hydronephrosis very early in life, even from the fetal period.