

Multicystic dysplastic kidney

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Multicystic dysplastic kidney (MCDK) is the second most common cause of an abdominal mass in newborns after hydronephrosis due to PUJO. The unilateral incidence is 1 in 1000–4000 live births. It has a 'bunch of grapes' appearance -

Figure 82.1 Computed tomography scan showing a pelvic kidney with calculus.

with multiple non-communicating cysts of varying sizes with out identifiable renal parenchyma. MCDKs can be diagnosed on antenatal ultrasound (US), with multiple cysts being evident as early as 15 weeks' gestation. Isotope renal scan will show a photopenic area in the renal fossa with surrounding back ground activity . Newbor ns may present with a palpable renal mass but nephrectomy is not necessary as the majority undergo involution within 5 year s. Bilateral MCKD is incompatible with life.

(b) Figure 82.2 (a) Horseshoe kidney (courtesy of Nivedita Kekre and Dr Madhuri Sadanala). (b) Intravenous urogram image at 5 minutes, showing horseshoe kidney and posterior orientation of the calyces (courtesy of Department of Urology, Christian Medical College, Vellore, India).

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