

## Acute hydronephrosis due to giant fecaloma in an elderly patient

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**Background:** Hydroureteronephrosis with acute urinary tract obstruction can lead to serious complications such as obstructive nephropathy or pyelonephritis, if the underlying pathologies are not corrected promptly and appropriately. We report a case of hydroureteronephrosis by giant fecaloma in an elderly woman with chronic constipation, which is the first report in Korea.

**Case report:** An 83-year-old woman with fever visited an emergency room, which was found to have right hydronephrosis in the computed tomography (CT) scan (Figure 1A). She had a 10-year history of chronic constipation and was in the long-term bed-ridden state due to the previous history of right femur fracture and cerebral infarction, but had no history of abdominal surgery or underlying anatomical abnormalities. The CT scan revealed an inordinately dilated rectum with a giant fecaloma compressing the right lower ureter and vesicoureteric junction (Figure 1B, 1C), which was identified in the KUB (Kidney Ureter Bladder) image (Figure 1D). Through the manual disimpaction of fecaloma and simultaneous lavage with rectal tubes, the hydroureteronephrosis was subsequently resolved, and then the acute pyelonephritis and renal function became improved. 5 days after admission, she discharged without any complications.

**Discussion:** Among the causes of urinary tract obstruction, extrinsic compression by the gastrointestinal (GI) system is an infrequent finding. However, chronic constipation and fecal impaction, which is a common clinical problem, can predispose to develop huge fecaloma resulting in acute hydronephrosis and pyelonephritis even in patients without underlying anatomical abnormalities such as colon surgery, GI tract tuberculosis, diverticulosis, or Crohn's disease. Chronic constipation can lead to giant fecaloma threatening urinary tract patency, especially in elderly patients with immobility, dehydration, or pain killers decreasing GI motility. Although it is a rare cause of acute obstructive nephropathy or pyelonephritis, clinical physicians should consider this condition as a cause of hydronephrosis in elderly patients with chronic constipation.

