

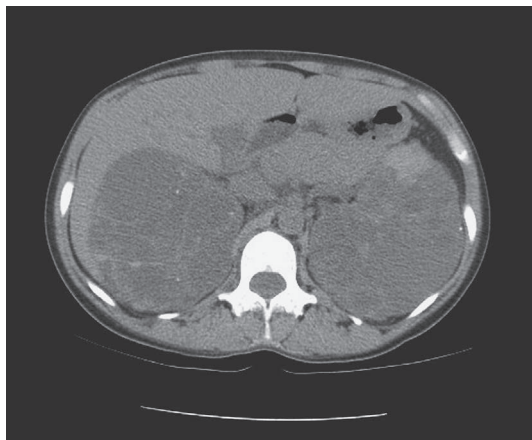
Cyst Infection in Autosomal Dominant Polycystic Kidney Disease

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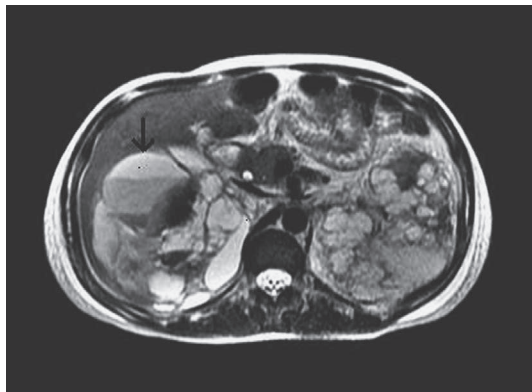
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Picture 1.



Picture 2.

A 22-year-old woman was admitted to the hospital for fe-

ver and right flank pain lasting for 3 days. She had a history of autosomal dominant polycystic kidney disease (ADPKD), and chronic kidney disease stage V for several years. Urine analysis showed hematuria and pyuria. Urine culture was negative. An unenhanced computed tomography (CT) examination revealed multiple renal cysts, some of which showed hemorrhage (Picture 1). Despite antibiotic therapy, the patient's fever persisted for several days. MRI showed multiple renal cysts and a predominant 5.4 cm cyst in the upper pole of the right kidney with a fluid-fluid level suggestive of infected cyst on T2-weighted image (Picture 2).

It is difficult to diagnose an infected renal cyst in patients with ADPKD, due to limitations of conventional ultrasound and CT imaging (1). Isolation of an infected renal cyst by MRI has been reported, but experience is limited, as to date there are few reports in the literature (2).

The authors state that they have no Conflict of Interest (COI).

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