INTRODUCTION AND AIMS: Extrarenal manifestations of vasculitis are frequent and can affect any organ. Many of these extrarenal manifestations are initially misdiagnosed as idiopathic 

METHODS: We report a case of extrarenal vasculitis presenting as a retroperitoneal liposarcoma.

RESULTS: A 30-year-old woman presented with life-threatening pulmonary hypertension and ascites. A computed tomography scan revealed a retroperitoneal mass. Biopsy of the mass confirmed the diagnosis of retroperitoneal liposarcoma.

CONCLUSIONS: Extrarenal vasculitis may manifest as retroperitoneal liposarcoma. Early recognition and treatment are crucial to improve patient outcomes.

EXTRAMEMBRANOUS GLOMERULONEPHRITIS REVEALING RETROPERITONEAL LIPOSARCOMA

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INTRODUCTION AND AIMS: Extramembranous glomerulonephritis is one of the most common causes of nephrotic syndrome in adults (about 20%). This glomerulopathy can occur during lupus, after taking medication, complicate cancer, or be secondary to hepatitis B, syphilis. But, most often, it is said to be idiopathic, in relation to the presence of autoantibodies, foremost among which is an antibody directed against a podocyte protein: the phospholipase A type M receptor (PLA2R). However, the discovery of these antibodies does not solve all the situations encountered, as illustrated by the existence of secondary extramembranous glomerulonephritis with anti-PLA2R activity.

METHODS: We report a medical observation about a case

RESULTS: In this spirit, we report the observation of a 64-year-old hypertensive patient admitted for the management of edematous-ascitic syndrome. The investigations reveal an impure nephrotic syndrome with renal failure and microscopic hematuria. Renal biopsy shows immune complex deposits on the outer wall of the glomerular capillary wall. The diagnosis of extra-membranous glomerulonephritis is then made. The dosage of anti-PLA2R antiproton was positive. The etiological investigations reveal an abdominal mass whose tomodensitometric aspect is in favor of a retro-peritoneal liposarcoma. The patient underwent surgical excision of her tumor. The pathological study confirmed the diagnosis of liposarcoma.

CONCLUSIONS: This observation underlines the interest of the investigations in search of a secondary form of an extramembranous glomerulonephritis even in case of positive anti-PLA2R AC.