Laparoscopy Assisted ‘U’ Configuration Bilateral Ileal Ureter in Pelvic Lipomatosis with Bilateral Ureteric Obstruction

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INTRODUCTION

Pelvic lipomatosis is a benign proliferation of adipose tissue predominantly in the pelvic retroperitoneum. Involvement of the bladder and ureter may cause bilateral hydrouretonephrosis and low capacity bladder. We present the case report of a patient with pelvic lipomatosis causing bilateral hydrouretonephrosis with low capacity bladder managed by laparoscopy assisted ‘U’ configuration bilateral ileal ureter.

CASE REPORT

A 45 year old gentleman presented with lower abdominal pain with mild voiding and storage lower urinary tract symptoms for a year. Clinical examination revealed mild lower abdominal distension and the prostate was felt a bit higher level in the pelvis. Serum Creatinine was 1.6 mg/dl. Micturating cystourethrogram showed a tear shaped, low capacity (100 ml) bladder with irregular contour (Figure 1). Computed tomography confirmed the diagnosis of pelvic lipomatosis and bilateral hydrouretonephrosis with obstruction below the level of pelvic brim (Figure 2). There was no bowel or blood vessel involvement. Tc99m-DTPA (Diethylene Triamine Pentacetic Acid) renogram showed bilateral reduced cortical function with delayed transit time, and prolonged T1/T2 (Figure 2). Urodynamic evaluation revealed small