ABSTRACT POSTER

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TIPOLOGIA: POSTER

ARGOMENTO: Caso clinico

TITOLO: Adrenal incidentalomas in Emergency Room: acute anemia by unilateral adrenal haemorrhage.

INTRODUZIONE: Adrenal haemorrhage is rare in adults occurring in association with trauma, sever physical stress, surgery, anticoagulant therapy, septicaemia, hypotension or tumor. We report two cases of unilateral adrenal haemorrhage presenting as sever anemia with abdominal pain.

METODI: Clinical and biochemical data of the two patients are presented and the pertinent literature is reviewed.

RISULTATI: A 28-years-old woman was admitted to the Emergency Room because of abdominal pain, nausea and fever. US abdomen documented a huge right liquid abdominal mass of possible adrenal origin, with signs of recent bleeding. Blood pressure was normal. Ormonal evaluation excluded glandular disfunction. Lab workup disclosed severe anemia (Hb 7.3 g/dl). She was subjected to adrenalectomy by laparotomy. The lesion measured 18 cm, istology is of adrenal pseudocyst. She was discharged with a satisfactory condition on 5th day after surgery. The second case is a 52-years-old man, complained of flank pain and lipotimia. He only reported history of untreated mild hypertension. He underwent emergency abdomen TC showed a large retroperitoneal hematoma from arterial bleeding involving the kidney and right adrenal gland. After hemodynamic stabilization, the patient was subjected to selective angiography and embolization of the right adrenal artery. Labs showed severe anemia (Hb 9.4 g/dl) requiring transfusion.

Adrenal pseudocysts are rare conditions usually incidentally diagnosed, mostly in the 4 and 5 decades of life, with female predominance. Patients are asymptomatic until the tumour becomes large enough to compress adjacent organs. So far, literature reported only a few cases of large size adrenal cysts presents with acute abdomen and hypovolemic shock in pregnant and non-pregnant females, due to adrenal bleeding, and treated successfully with adrenalectomy. Spontaneous hematomas in adults that develop after a history of hypertension are even rarer and often be discovered in a chronic stage of evolution without any suggestive clinical setting.

CONCLUSIONI: Adrenal haemorrhage is a rare but potentially devastating feature of adrenal incidentalomas and must be considered in the differential diagnosis of patients with abdominal symptoms and unexplained anemia. Earlier diagnosis and treatment of these lesions is curative.