We report the case of a 73 year old man with past medical history of endoprosthesis for an aortic thoracoabdominal aneurysm in 2005, pulmonary embolism in 2007 and a pacemaker for complete AV block. He was on anticoagulation treatment with coumadin.

He presented to the Emergency Department with abdominal pain and oligoanuria. CT scan showed a 13 cm subcapsular haematoma.

Figure 1. CT with subcapsular haematoma.

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diameter subcapsular hematoma of the left kidney and free fluid in the perirenal space. There were bilateral hemorrhagic renal cysts (Figure 1 and 2 “CT with subcapsular hematoma”). A thoracoabdominal aortic aneurysm was also seen with a stent at the aortic arch and descending aorta, there was a hematoma and mural thrombus extending to the descending aorta (Figure 3 “Aortic aneurysm”).

We decided conservative treatment with bed rest and removal of the anticoagulation treatment, with good patient response.

Currently, the patient is asymptomatic, with a resolving subcapsular hematoma, waiting for the assessment by vascular surgery.