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Invading of renal cell carcinoma in inferior vena cava and right atrium with a huge metastatic thrombus

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Background: Renal cell carcinoma (RCC) with cavoatrial involvement represents a major surgical challenge. Several surgical techniques for the treatment of these tumors have been proposed, but because of a small number of patients and limited follow-up, substantial controversy about the best operative management still exists.

Case report 1: A 54-year-old woman, with no previous comorbidities, comes to the emergency room with low back pain, weight loss and edema of the lower legs. Computed tomography (CT) revealed a massive infiltrative expansive formation in the abdomen that affected practically the entire right kidney, measuring 8.2 cm x 7.6 cm that invaded the collecting system and was in close contact with the right hepatic lobe and the head of the pancreas. It also stood out the infiltration of the renal vein on this side and IVC extending to its intrahepatic portion, until the confluence of the suprahepatic veins, with almost complete luminal occlusion associated with the presence of retroperitoneal lymph nodes of a maximum of 10 mm.

Case report 2: A 61 year old man with abdominal mass, was presented in the hospital referring loss of weight (14kg in 1.5 months). The patient underwent routine blood analysis which came out with a high CRP and D-Dimer. These results were interpreted as a sign of Covid 19 infection and the patient was treated for Sars-Cov-2. After 2 weeks, the CRP levels went up again. The tampon for Sars-Cov-2 resulted negative. CT found out a large, heterogeneous, solid mass in the right kidney, encasing right renal vein and inferior vena cava. An intracaval hypervascular lesion was seen inside vena cava.

Surgery: Right radical nephrectomy and right surrenalectomy was performed, vena cava inferior was freed from the tumor. After that, the thrombus in the right atria and then the remaining intracaval part was removed.

Conclusion: Advanced extension of renal cell carcinoma can occur with no apparent symptoms and be detected incidentally. In rare circumstances, atypical presentation of renal cell carcinoma should be considered in a patient presenting with right atrial mass detected by echocardiography. Renal cell carcinoma with inferior vena cava and right atrium extension is a complex surgical challenge, but excellent results can be obtained with proper patient selection, meticulous surgical techniques, and close perioperative patient care.

Recent Publications:

1. Andi Kacani, et.al, (2022). Invading of Renal Cell Carcinoma in Inferior Vena Cava and Right Atrium with a Huge Metastatic Thrombus. Open Access Macedonian Journal of Medical Sciences. 10. 107-110.
2. Andi Kacani, et.al (2021). A Huge Aneurism of Ascending Thoracic Aorta. Albanian Journal of Trauma and Emergency Surgery. 5. 883-886.
3. Andi Kacani, et.al (2021). Treatment of COVID-19 Complications at Home Conditions. Albanian Journal of Trauma and Emergency Surgery. 5. 823-828.

Biography

Andi Kacani is a cardiac surgeon at American Hospital, Albania. He has completed his Master's degree at the University Hospital of Tirana, USA. He has participated in various conferences and conventions.

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