

Pulmonary embolism associated with renal cell carcinoma.

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Kidney cancer is the third most common urological cancer, accounting for 3.5% of newly diagnosed cancers. We demonstrate the case of a 75-year-old man, who presented with acute dyspnea (the ejection fraction was 20%). He had

coronary disease and, ten years previously, had undergone coronary artery bypass grafting. Following a number of diagnostic examinations, the patient was diagnosed with pulmonary embolism. After initiation of Enoxaparin

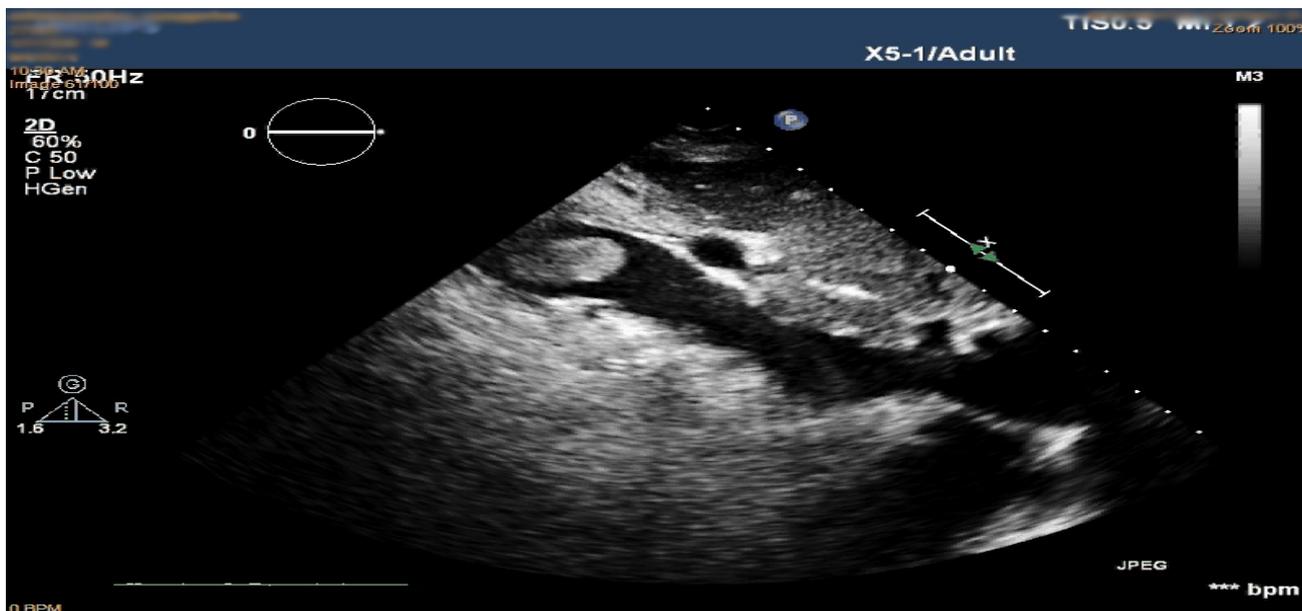
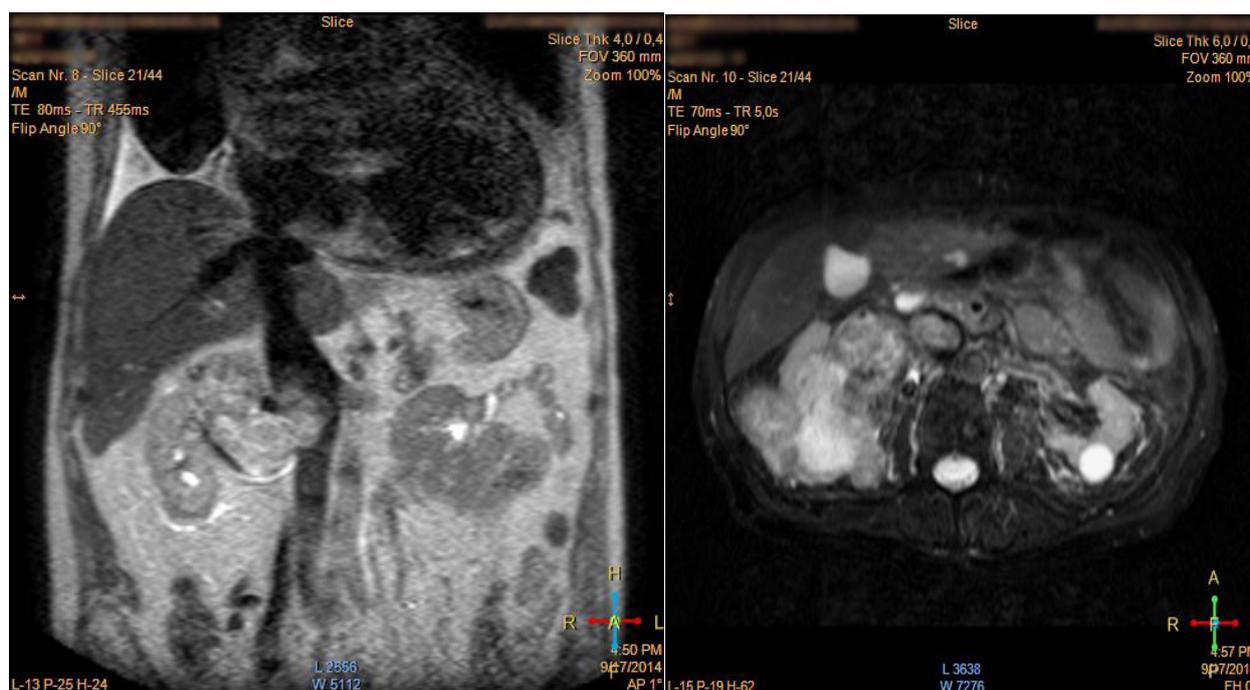


Figure 1. Abdominal ultrasound shows a thrombus within the IVC.



Figures 2A and 2B. MRI views of the tumor thrombus inside the IVC.

administration, the clinical symptoms were significantly improved. Abdominal ultrasound examination showed the presence of a thrombus in the inferior vena cava (IVC) (Figure 1). This finding was confirmed by a MRI (Figures 2A and 2B). Histopathology revealed it to be renal cell carcinoma.

Kidney cancer tends to invade the venous system, especially the renal vein and/or the IVC. It is estimated that 4% to 10% of renal cancers form a tumor thrombus within the local venous circulation, where about 1% of them extending into the right atrium.

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