Bilateral Giant Renal Cysts Masquerading as Malignant Ascites

A 57-year-old man presented with a 6-month history of suprapubic pain, abdominal distension, anorexia, and altered bowel habit. He had no urological symptoms. Physical examination revealed a distended abdomen with shifting dullness and a benign prostate.

Routine hematology, biochemistry, and serum tumor markers were within normal limits. Computed tomography of his abdomen revealed bilateral simple renal cysts with the largest measuring 28 × 14 × 16 cm.

He underwent bilateral renal cyst aspiration whereby 6 liters of fluid were removed with negative cytology. The patient reported rapid weight loss of 4 kg and restoration of appetite within days. Subsequent ultrasonography after 4 months revealed partial reaccumulation of the cysts, but the patient remained asymptomatic.

Unilateral renal cysts measuring 15 cm have been reported to cause anorexia, intermittent diarrhea, and intestinal obstruction, and when aspirated, have contained 1.5 liters of fluid.[1] Giant renal cysts presenting simply with progressive abdominal distension can lead to a misdiagnosis, such as obesity, which reverses following open decortication.[2] Laparoscopic decortication for renal cysts up to 25 cm remains technically challenging.[3] Massive renal cysts may present with gastrointestinal symptoms, which resolve promptly following decompression.

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