

# A 34-year-old man with back pain

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## CASE REPORT

A 34-year-old man with an unremarkable medical history (except for surgical repair of an inguinal hernia several years ago) was referred to the emergency department because of sudden, severe, colicky pain in his back and right flank. Intramuscular injection with diclofenac 75 mg by his general practitioner had no effect on his symptoms. He used no medication, denied traumatic injury, and had no gastrointestinal complaints. At physical examination his blood pressure was 135/85 mmHg, pulse 80 beats per minute, and temperature 36.2° Celsius. Deep palpation of the abdomen, flank, and back was not painful. Laboratory tests revealed slightly elevated inflammatory parameters (i.e., C-reactive protein 49 mg/l, leukocyte count  $11.4 \times 10^9/l$ ) and an elevated lactate dehydrogenase level of 783 U/l. Urine analysis showed microscopic haematuria ( $> 200$  erythrocytes/ $\mu$ l). The patient was admitted to the urology ward under suspicion of urolithiasis. An abdominal ultrasound and abdominal X-ray, however, showed no

**Figure 1.** Contrast-enhanced CT scan of the abdomen in the coronal imaging plane



abnormalities of the kidneys or urinary tract. Therefore, a computed tomography (CT) scan was performed (*figure 1*).

## WHAT IS YOUR DIAGNOSIS?

See page 46 for the answer to this photo quiz.