

Renal Vascular Diseases

LEC 6

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- Disorders affecting renal blood supply
- Includes renal artery, renal vein, intraglomerular microvasculature

These disorders can cause:

- Renal ischemia
- Secondary hypertension
- Acute kidney injury (AKI)
- Chronic kidney disease (CKD)
- ESRD needing dialysis

Renal Artery Stenosis

Causes

1. Atherosclerotic (70–90%)

- Older adults
- Associated with: DM, HTN, dyslipidemia
- Usually proximal 1/3 of the renal artery

- 2. Fibromuscular Dysplasia (FMD)
- • Young women (20–40 years)
- • “String of beads” appearance
- • Involves mid to distal segments of the artery

- Pathophysiology
- \downarrow Blood flow \rightarrow kidney senses low perfusion \rightarrow releases renin \rightarrow activates RAAS \rightarrow
- \uparrow Angiotensin II \rightarrow vasoconstriction \rightarrow severe resistant hypertension.
- Chronic hypoperfusion \rightarrow kidney shrinkage (“ischemic nephropathy”).

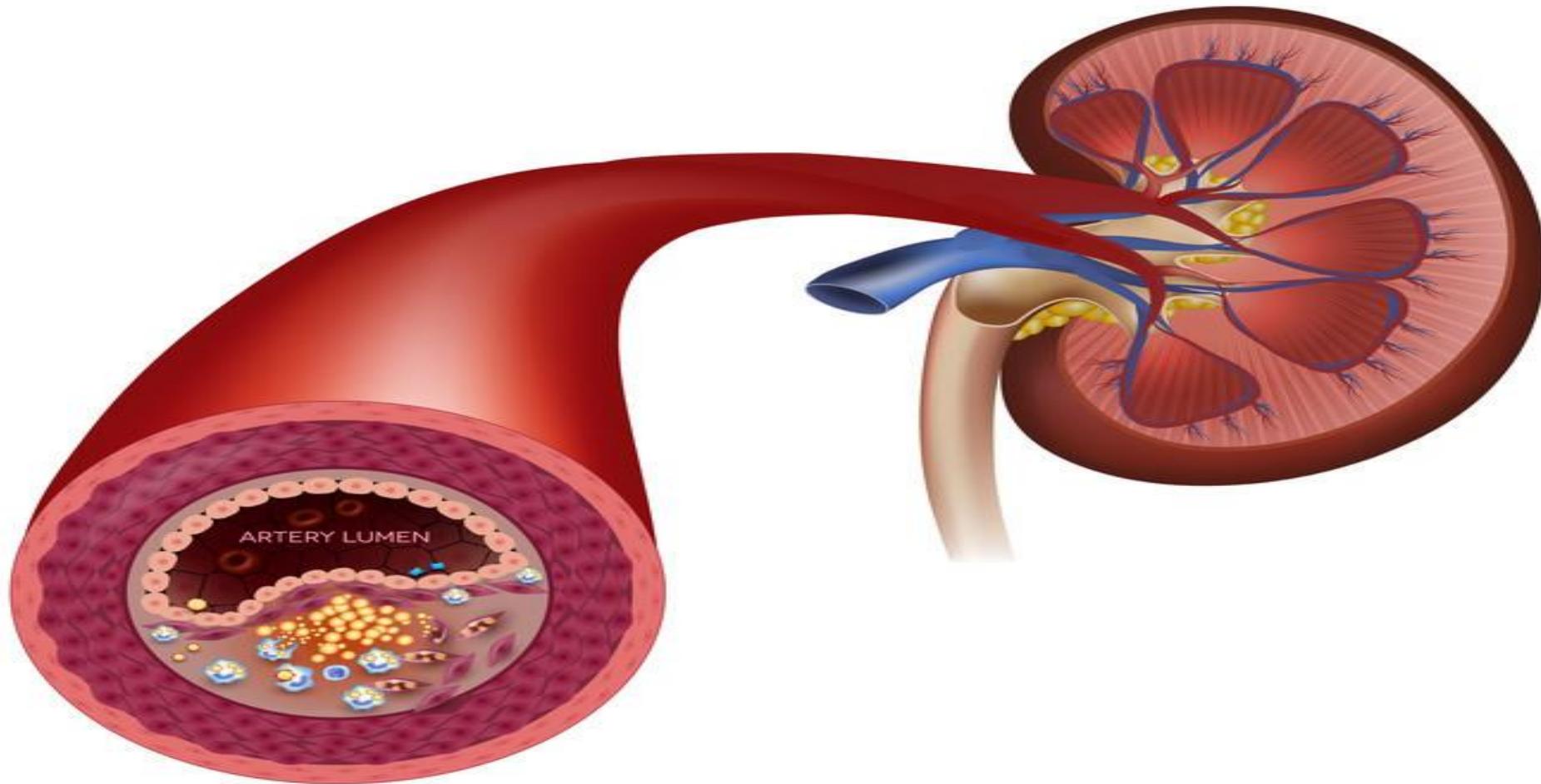
- Clinical Features
- Resistant hypertension (≥ 3 meds)
- Sudden onset HTN in young female (think FMD)
- Acute pulmonary edema (“flash edema”)
- Worsening renal function after ACEi / ARBs
- Asymmetric kidney sizes

- Doppler Ultrasound
 - ↑ Renal artery velocity
- CT/MR Angiography
 - Narrowing of the lumen
 - Atherosclerotic plaques (calcified)
 - FMD: “string of beads” look
- Blood Tests
 - Normal or high renin
 - Worsening creatinine after ACEi

ATHEROSCLEROSIS

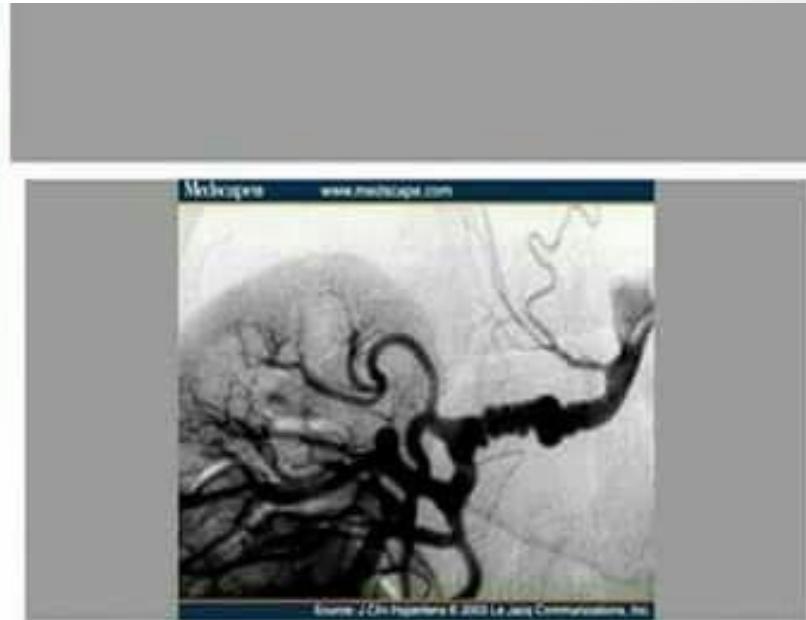
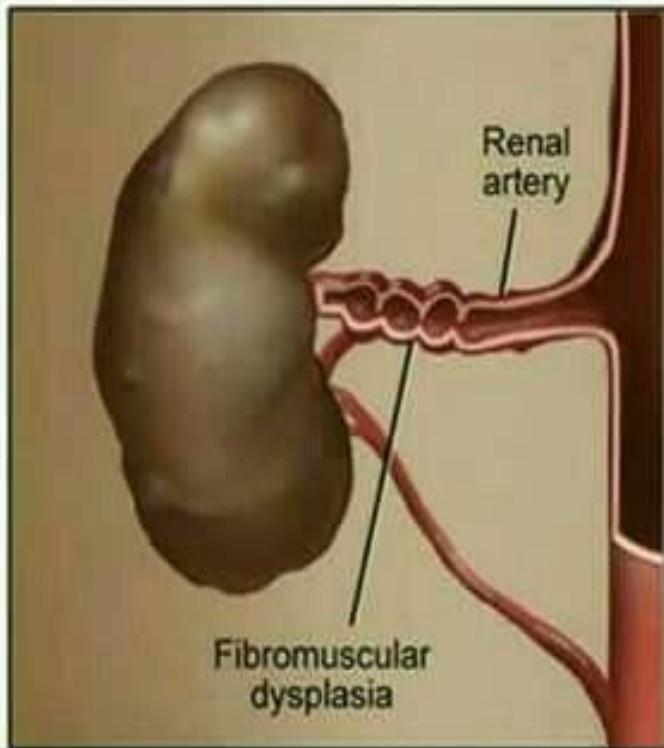
RENAL ARTERY STENOSIS (NARROWED ARTERY)

REDUCED BLOOD FLOW TO THE KIDNEY





Fibromuscular dysplasia



Conventional Contrast Angiography illustrating A Fibromuscular Dysplasia Of The Right Renal Artery With Clic String Of Beads on a string renal artery beads art



Renal Vein Thrombosis

- Causes
- • Nephrotic syndrome (most common)
- • Hypercoagulable states (Factor V Leiden, antiphospholipid)
- • Trauma
- • Tumors compressing renal vein

- Pathophysiology

- A thrombus blocks venous return →
- ↑ pressure → renal congestion → ↓ filtration → AKI.

- Clinical Features
- **Acute RVT**
- • Sudden flank pain
- • Gross hematuria
- • Nausea/vomiting
- • Enlarged painful kidney
- • AKI
- **Chronic RVT**
- • Often asymptomatic
- • Detected indirectly (e.g., in nephrotic syndrome)

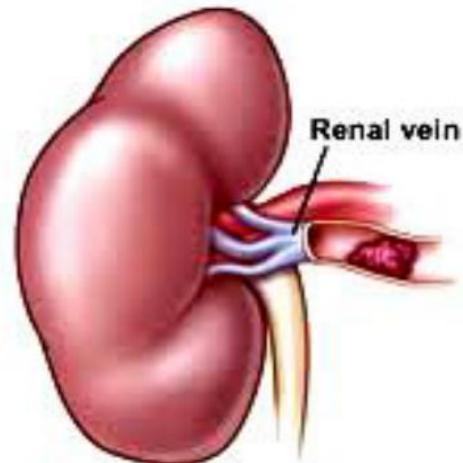
- **Doppler Ultrasound**

- Absent or reversed renal vein flow
- Enlarged swollen kidney

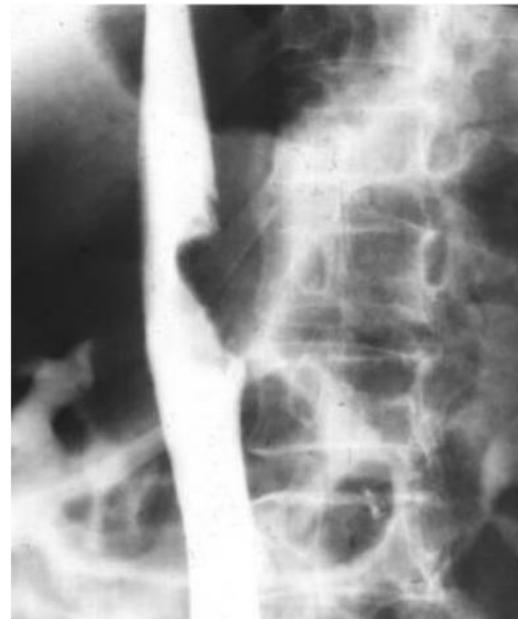
- **CT Venography**

- Best test
- Direct visualization of the thrombus
- Cortical perfusion defects

Renal Vein thrombosis



Clot in renal vein



Hypertensive Nephrosclerosis

Cause:

- Long-standing uncontrolled hypertension → thickening of afferent arterioles → ischemia → glomerulosclerosis.

Pathophysiology

- Hyaline arteriolosclerosis
- Fibrotic glomeruli
- Tubular atrophy

Clinical Features

- Long-standing HTN history
- Slowly progressive CKD
- Mild proteinuria (<1 g/day)
- No hematuria usually

Imaging findings

- Small, shrunken kidneys
- Increased echogenicity on ultrasound



Pathological change of Renal Hypertension induced nephrosclerosis, atrophy of renal cortex



- **Atheroembolic Renal Disease**

Cause:

Cholesterol crystal emboli from large arteries, often after:

- **Cardiac catheterization**
- **Angiography**
- **Anticoagulation**

Pathophysiology

Cholesterol crystals lodge in small renal arteries → inflammatory reaction → occlusion → renal ischemia.

Clinical Features

- AKI 2–7 days after vascular procedure
- Livedo reticularis (skin mottling)
- Blue toe syndrome
- Eosinophilia
- Low complement levels

Labs

- Eosinophilia
- High ESR
- Low C3/C4

Skin or renal biopsy

- Cholesterol clefts (“needle-shaped spaces”)

Thrombotic Microangiopathies (TMA)

(TTP, malignant HTN)

Pathophysiology

Endothelial injury → platelet thrombi in small renal vessels → AKI.

Clinical Features

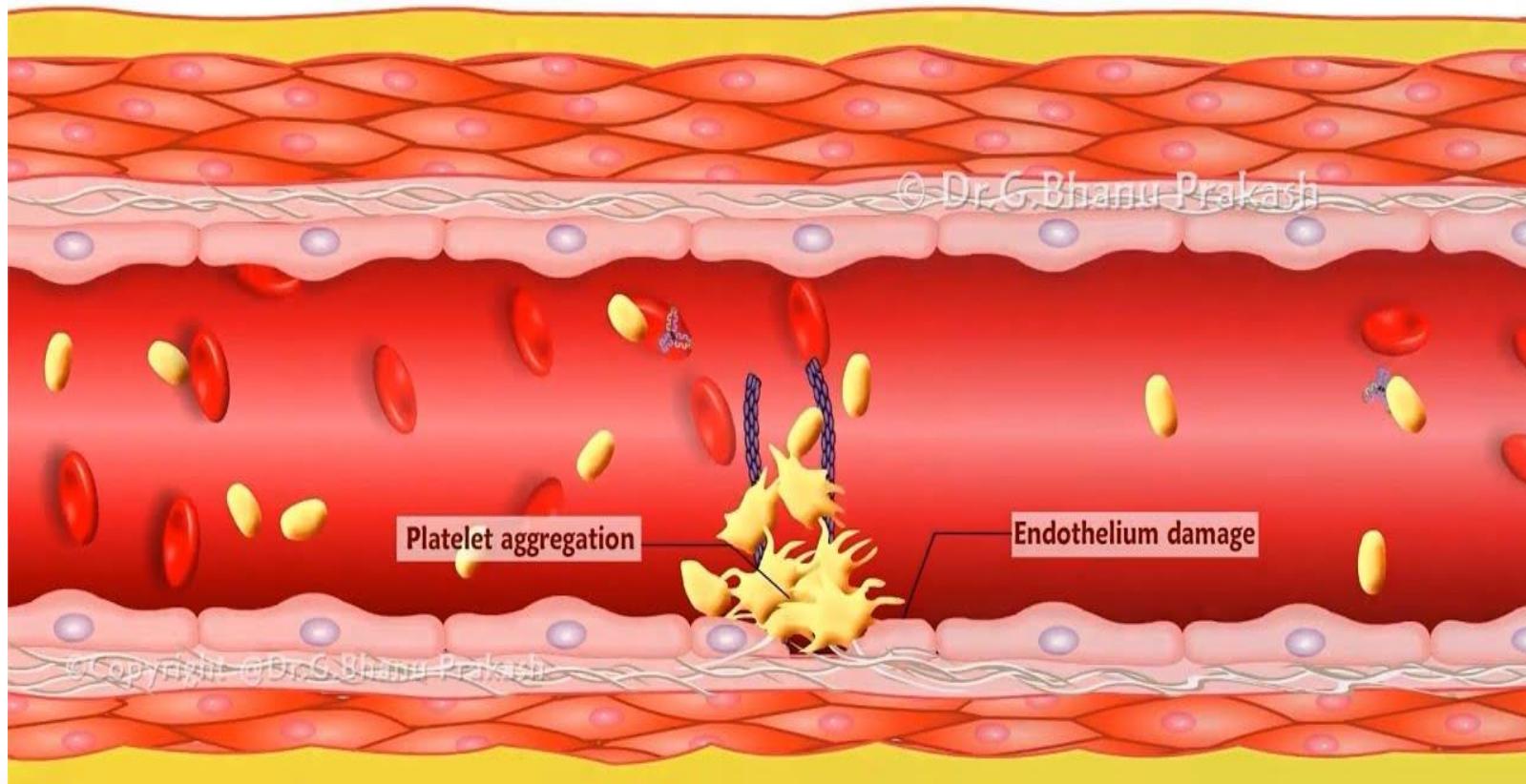
- Hemolytic anemia
- Thrombocytopenia
- AKI

Thrombotic Microangiopathies

(Non-immunogenic thrombocytopenia)



Definition



Renal Infarction

Causes

- Emboli from atrial fibrillation
- Renal artery thrombosis
- Trauma

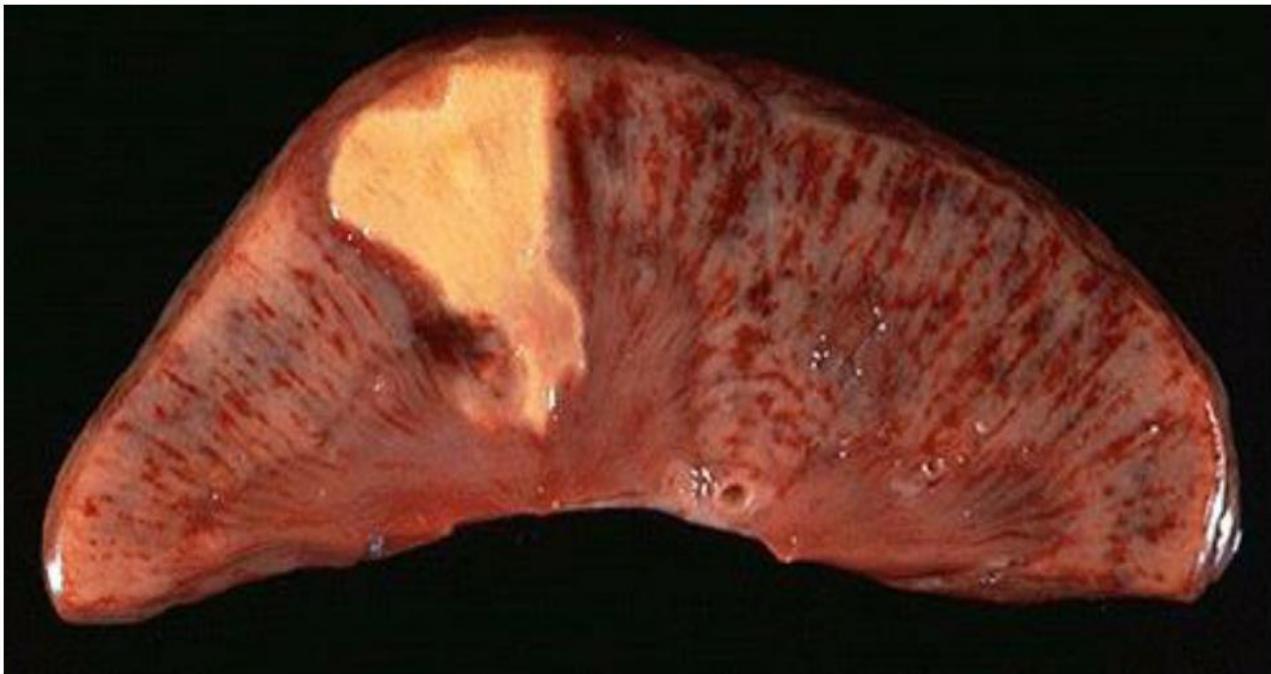
Clinical Features

- Sudden severe flank pain
- Hematuria
- Markedly elevated LDH
- Normal CK

Imaging

- Wedge-shaped perfusion defect on CT

Infarction of the kidney



Diagnostic Tools

- Doppler Ultrasound
- CT Angiography
- MR Angiography
- Renal Angiography

The End