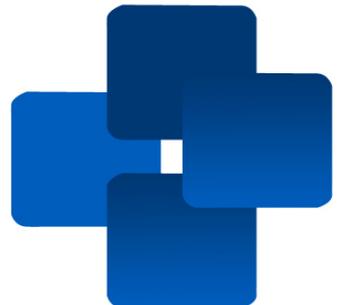


Antenatally diagnosed Hydronephrosis

(Anomalies/Problems)

Information for Parents



Antenatal Hydronephrosis

Antenatal — Before Birth
Hydronephrosis — Dilatation of kidneys

Where are the kidneys and what do they do?

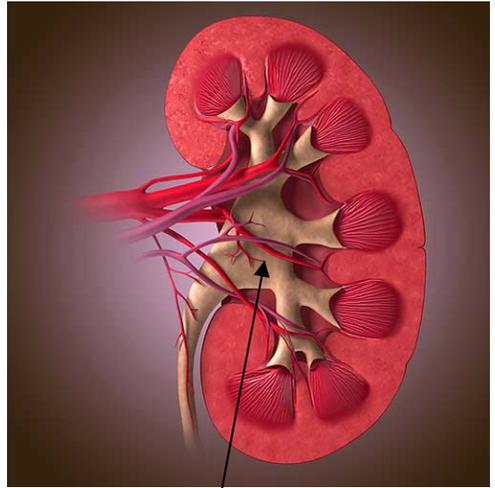
The kidneys are located in the back of the abdomen just below the ribs. Their major function is to clean the blood by flushing the waste in the urine. The Kidneys are connected to thin tubes called ureters which carry the urine to the bladder and again through another tube called the urethra which finally carries the urine to outside the body.

During early growth of the kidneys, conditions sometimes develop that may change the way the kidney looks or functions. One such condition is Hydronephrosis.

What is Hydronephrosis?

It is the stretching (or dilatation) of the inside, or the collecting part, of the kidney, called the pelvis.

The diagram shows the pelvis of the kidney.



pelvis of the kidney

How is it first detected?

An Ultrasound Scan performed at around 20 weeks of pregnancy usually detects it.

Why is it so important to monitor antenatal Hydronephrosis?

It is important to identify

- risk of long term kidney problems, which can lead to high blood pressure and kidney failure.
- obstruction to urine outflow, which may require early surgical intervention.

Why does my baby have Hydronephrosis?

There are different causes, however, in most cases (60%-

90%) no cause is found and no further problems occur.

Vesicoureteric reflux (VUR)

This occurs when urine flows back up to the kidney when the bladder fills or empties. This increases the risk of infection which, if not treated or prevented, may cause some damage to the kidneys.

Blockage

This may occur at the pelviureteric junction (PUJ) where the ureter meets the kidney. In boys, inside the penis there may be small bits of excess flesh (posterior urethral valves), although this is very rare.

What happens after my baby is born?

- **Antibiotics**

Antibiotics at a low daily dose to prevent infection are initially prescribed in the hospital, and then by your GP, until you have an appointment with a doctor in the hospital at 6 weeks.

- **Ultrasound**

Ultrasound within one week of birth, and again at 6 weeks old.

- **MCUG - Micturating Cystourethrography**

If your baby is male and both

sides on the antenatal scan indicated Hydronephrosis, the MCUG will look for reflux or back flow of urine before your baby is discharged from hospital.

The antibiotic dose should be doubled the day before this test, for a total of five days.

During this test a small tube will be passed into your child's bladder through the urethra and x-rays will be taken after a dye has been passed through the tube into the bladder.

This test looks uncomfortable but a pain relieving gel is used to take away the pain.

- **Outpatient appointment**
You will be given an appointment in the hospital to discuss the results of the tests.

What happens if the Ultrasound and the MCUG are normal?

We stop antibiotics and discharge your baby.

What happens if the Ultrasound and the MCUG are abnormal?

More tests will need to be arranged which will be explained to you in clinic.

Will my child need surgery?

The answer depends on test results and is usually only necessary in very rare cases.

**WOMEN'S AND CHILDREN'S
DIVISION**

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NNU patient information

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