

Answer: A. Angiomyolipomas

Angiomyolipomas (AMLs) are the most common benign renal neoplasms.¹⁾ AMLs are usually detected incidentally.¹⁾ However, once it increases in size to 4 cm, symptoms can develop with hemorrhage, a palpable mass, or symptoms related to mass effect. Bilateral renal masses are seen in particular in patients with tuberous sclerosis complex (TSC), which occurs in 40-80% of patients. Our patient did not have any symptoms of TSC. AMLs demonstrate characteristic fat attenuation on CT. Thus, the diagnosis of AMLs is based on the demonstration of macroscopic fat within a lesion. The most important issue is the differentiation of AMLs from malignant renal disease such as renal cell carcinoma, lipoma, liposarcoma, oncocytoma, Wilms tumors, and teratoma.¹⁾ Excision biopsy of the right mass excluded such diseases. Renal preservation should be given proper consideration in all patients with AML. Symptomatic lesions are treated by surgical resection or selective embolization.

References

- 1) Halpenny D, Snow A, McNeill G, Torreggiani WC. The radiological diagnosis and treatment of renal angiomyolipoma-current status. *Clin Radiol.* 2010;65(2):99-108.

Legends of Figures

Figure 1. Physical examination revealed palpable masses in the bilateral flank region

Figure 2. Coronal computed tomography imaging showed giant bilateral renal tumors with fat attenuation, measuring 152×104 mm on the right and 167×129 mm on the left.