OP06.08: Prenatal diagnosis of pelvic kidney—should we expect compensatory growth in the normal positioned kidney?

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**Aim**
To assess presence and extent of prenatal compensatory growth of the normal positioned kidney (NPK) in case of an isolated pelvic kidney (PK).

To construct nomograms for both kidneys for clinical use during pregnancy.

**Results**
109 fetuses (16-36 wks)

Associated Malformations
- CAKUT: PK- 13.7% NPK - 6.4%
- Extra-renal: 10.75%

193 measurements

The raw values of NPK & PK showed significant correlation with GA. A cubic relation curve described best this relationship (NPK $R^2=0.824$ PK $R^2=0.611$)

There was a significant difference between the mean predicted values of the NPK compared with Chitty nomograms.

**Conclusions:**
- Normal positioned kidney shows compensatory growth during fetal life even in the presence of a normal sonographic appearance pelvic kidney.
- This finding has clinical significance since low nephron endowment is associated with increased risk HTN and CKD as an adult.

**Methods**
Retrospective study 15 years.

Prenatal Dx pelvic kidney

Inclusion criteria: AGA, normal AFI, no urinary tract dilatation or abnormal parenchyma, absence of associated congenital anomalies.