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Chronically Inflamed, Quietly Malignant: An Unusual Renal Tale – A Rare Case Report

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Primary squamous cell carcinoma of the kidney is a rare and aggressive malignancy, comprising 0.5–0.8% of renal tumors usually linked to chronic calculi, infection, or irritation. We report an 85-year male with 15 days of right flank pain. Imaging revealed right hydroureteronephrosis with impaired renal function but no calculi. CECT suggested chronic obstruction with possible malignant stricture, and frozen section of a lymph node confirmed metastatic SCC. A right radical nephrectomy was performed. Grossly, grey- white lesion arose from the renal pelvis and infiltrated the parenchyma. Histology showed nests of polygonal squamous cells with pleomorphic nuclei, prominent nucleoli, and eosinophilic cytoplasm, consistent with moderately differentiated SCC (pT3aN1Mx, Stage III) with chronic pyelonephritic changes. This case is notable as the patient lacked usual risk factors such as renal calculi or recurrent infection, demonstrating that SCC can occur in their absence. Given nonspecific presentation and poor prognosis, renal SCC should be considered in differential diagnosis of renal masses, particularly with hydronephrosis or atypical imaging. Radical nephrectomy remains the cornerstone of treatment, with systemic chemotherapy or radiotherapy reserved for advanced disease.

Keywords: Squamous cell carcinoma, Renal pelvis, Hydroureteronephrosis, Nephrectomy

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