

Multicystic dysplastic kidney

Fetal Medicine Unit



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01872 252690



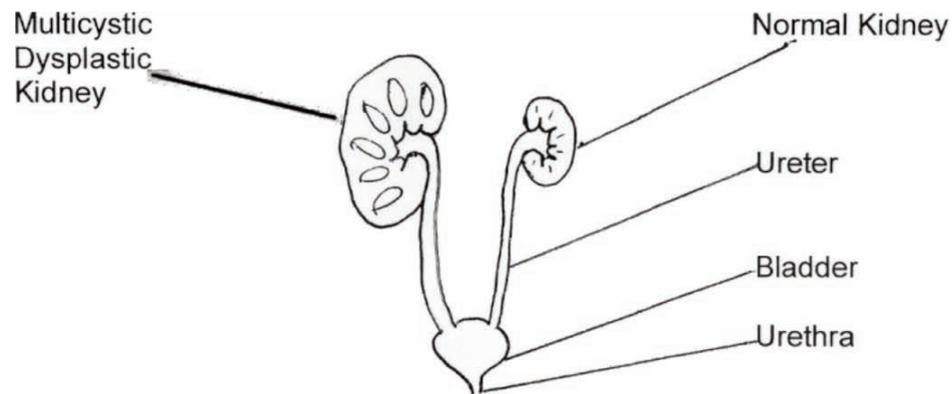
Who is this leaflet for?

An ultrasound scan of your baby has shown that it has a problem called a multicystic dysplastic kidney. The leaflet explains more about this condition and aims to answer some common questions.

What is this?

One of your baby's kidneys has become enlarged, with lots of fluid filled spaces or cysts within it (multicystic) and hence has not formed properly (dysplastic). This kidney will not work effectively, and will produce little or no urine.

Kidney problems are one of the most common abnormalities that we detect on scan. We normally have two functioning kidneys but if one is abnormal (or even absent), this usually does not present major problems to the baby, because the other kidney will compensate, providing full kidney function throughout life.



Why does it occur?

We do not know why this has happened, but it is not thought to be due to anything you did or did not do.

Will my baby have other abnormalities?

This is usually an isolated finding, but occasionally this may be associated with other problems. We will look very carefully at the baby during the scan, and if we see any other indication of problems we would discuss these fully with you.

Occasionally these kidney problems can be associated with an underlying condition in the baby, and we will discuss with you whether any further investigations are appropriate.

Will this affect my baby during pregnancy?

Assuming that the other kidney is working normally, it is unlikely that this will affect your baby during pregnancy. We will monitor the growth of your baby, and check the amount of fluid around your baby using ultrasound scans later in the pregnancy.

Will this condition affect my baby's future life?

If the other kidney is working normally (which is usually the case if the kidney looks normal on scan), it is unlikely that there will be any long-term effects. Your baby will be given antibiotics following birth to reduce the risks of kidney infection developing, and will be closely followed up by the paediatricians (specialist children's doctors), who will arrange a scan of your baby's kidneys within a few days of birth. Further scans will be required in the first months of life and your baby's blood pressure (which can occasionally become high) will be checked regularly.

The abnormal kidney may 'shriveled up', or it may need to be removed by an operation. If the paediatricians feel this may be required, they will arrange for you to meet the paediatric surgeon who co-ordinates care of babies with kidney problems, and you can ask him or her about long-term management.

Because babies with this problem occasionally require additional care by the paediatricians we recommend that your baby is born in hospital.

Any questions?

If you have any questions, please do not hesitate to contact us.

Fetal Medicine Unit
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Your GP, midwife or obstetrician may also be able to give you more information.