HISTOPATHOLOGICAL CHARACTERISTICS OF KETAMINE-ASSOCIATED UROPATHY AND THEIR CLINICAL ASSOCIATION

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Introduction

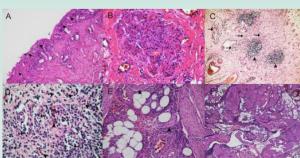
Urothelial denudation, submucosal lymphocyte and eosinophil infiltration was noted in bladder biopsy specimens in ketamine associated uropathy (KU) previous case However, series [1]. studies comprehensive of histopathological findings in entire bladder and ureters in KU and their correlation with the severity associated symptoms are scanty.

Methods

38 KU patients were enrolled in this study with provided detailed clinical histories and video urodynamic studies parameters. 13 of them was classified as clinically mild KU, cystoscopic hydrodistention; undergone whereas another 25 patients was classified as severe KU, undergone enterocystoplasty with or without ureter reimplantation [2]. Bladder and ureter specimens were obtained and stained with hematoxylin, eosin and immunohistochemical stain S100 for nerve hyperplasia distribution. The mucosa, muscle and subserosal layers of bladder and ureter were examined respectively. The severity of the histopathological findings was graded on a 4-point scale (0: none, 1: mild, 2: mild, and 3: severe), and it was correlated with clinical parameters, including visual analogue scale for pain (VAS), cystometric bladder capacity (CBC) and maximal bladder capacity (MBC) under general anesthesia.

Results

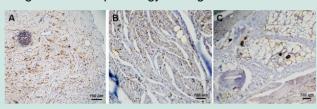
Inflammatory cells infiltration and nerve hyperplasia were found in the mucosa, muscle, and subserosal layers of the bladder and ureters in patients with KU. In mild KU, lymphocyte infiltration predominated. However, in severe KU, significant neutrophil, eosinophil, lymphocyte and plasma cell infiltrations were found in bladder mucosa.



(A) denuded epithelium (arrow head) with lymphocytes infiltration (100X) in mucosa, (B) nerve hyperplasia in mucosa(arrow head) (100X), (C) numerous neutrophil (arrow head) in mucosa(40x), (D) eosinophil (arrow head) and plasma cells (arrow) infiltration in mucosa (400X), (E) inflammatory cells infiltration and nerve hyperplasia in muscle layer (100X) and (F) inflammatory cells infiltration in serosal layers (40X)

Results (Continued)

Figure 2. Histopathology findings in KU ureter



KU ureter revealed: (A) inflammatory cells infiltration in all ureter layers (40X), (B) epithlium denudation (arrow) with mixed inflammatory cells in ureter mucosa (100X), and (C) nerve hyperplasia (arrow) in ureter mucosa (100X).

		Patients characteristics						
		VAS<6 N=15	VAS≧ 6 N=23	CBC≧ 100ml N=12	CBC<100ml N=26	MBC≧ 300m I N=14	MBC<300ml N=24	
Neutrophil	None or mild	15	11	11	15	12	14	
	Moderate or severe	0	12*	1	11	2	10	
	p-value	<0.001		0.060		0.147		
Eosinophil	None or mild	12	9	8	13	9	12	
	Moderate or severe	3	14*	4	13	5	12	
	p-value	0.020		0.486		0.506		
Lymphocyte	None or mild	10	4	8	6	9	5	
	Moderate or severe	5	19*	4	20	5	19	
	p-value	0.005		0.014*		0.014*		
Plasma cell	None or mild	15	17	11	21	14	18	
	Moderate or severe	0	6*	1	5	1	5	
	p-value	0.044		0.643		0.376		
Nerve hyperplasia	None or mild	13	8	9	12	11	10	
	Moderate or severe	2	15	3	14	3	14*	
	p-value	0.0	0.002*		0.161		0.043	

VAS: Visual Analogue Scale for bladder pain; CBC: cystometric bladder capacity; MBC: maximal bladder capacity; be.0.05 in ohi-square test

Table 2. Clinical parameters in KU patients with different severity of histopathological

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Neutrophil	None or mild (n=26)	4.27±2.96	104.045±56.22	267.61±142.01
	Moderate or severe (n=12)	8.54±1.29	49.125±13.11	108.75±41.89
	P-value	<0.001*	0.002*	0.001*
Eosinophil	None or mild (n=12)	4.44±3.29	99.93±50.67	255.29±151.82
	Moderate or severe (n=17)	7.02±2.15	77.35±57.47	179.16±117.66
	P-value	0.032*	0.390	0.121
lymphocyte	None or mild (n=14)	4.07±3.27	123.41±65.05	283.84±172.45
	Moderate or severe (n=24)	6.75±2.80*	66.72±30.27	175.00±89.44
	P-value	0.020*	0.027*	0.048*
Plasma cell	None or mild (n=32)	5.25±3.36	91.65±55.13	237.60±147.26
	Moderate or severe (n=6)	7.66±1.50*	74.75±52.5	137.50±47.87
	P-value	0.017*	0.309	0.003*
Nerve	None or mild (n=21)	5.92±3.30	93.00±61.51	247.85±170.93
hyperplasia	Moderate or severe (n=17)	7.10±2.42	78.75±57.56	153.33±81.64
	P-value	0.012*	0.180	0.010*

*: p<0.05 in independent T test

Conclusion

Whole-layer hyperplasia nerve cell infiltration, inflammatory neutrophils, eosinophils, lymphocytes, and plasma cells were seen in KU patients. Moderate to severe neutrophil **lymphocyte** infiltration in the bladder mucosa were associated more severe bladder pain and smaller bladder capacity. Histopathological examination is a useful tool to evaluate KU severity.

References

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- 2. Jhang JF, et al. Patient characteristics for different therapeutic strategies in the management ketamine cystitis Neurourol Urodyn 2017; 36:687-91.

Disclosures Statement: None