Abstract

Oxalate nephropathy is an uncommon condition which causes renal failure, which may be overlooked as a possible etiology for renal failure. A 45-year-old lady was presented with uremic symptoms and rapidly increasing creatinine (2.3 mg/dL \rightarrow 9.8 mg/dl) over 2 months. She is a known patient with diabetes mellitus with stable stage I renal impairment, without significant other comorbidities. She had no history of chronic diarrhea or previous gastrointestinal surgery. However, she has been taking an herbal product Inginee drink for its antioxidant's effects, for the last few months. Clinical examination was unremarkable. Urine microscopy was negative for calcium oxalate crystals with negative autoimmune panel, even though computed tomography scan revealed multiple non obstructing renal calculi. Kidney biopsy confirmed oxalate nephropathy. Her kidney function was rapidly deteriorated despite limiting dietary oxalate intake with adequate hydration and medical treatments, who finally required commencing long standing hemodialysis and refer to kidney transplantation.