Abstract

Polyarteritis nodosa is a small and medium vessel vasculitis with multi systemic manifestations. We present a case of a young female who presented with flank pain and bilateral lower limb swelling was found to have involvement of main renal artery stenosis which is a rare finding in PAN and was the cause of refractory hypertension. She had fulfilled ACR criteria for polyarteritis nodosa and started on high dose steroids as soon as the diagnosis was made. Despite of steroids disease rapidly progressed involving mononeuritis multiplex and cyclophosphamide pulse therapy was started. On day 3 of admission She had an acute onset ischaemic type chest pain and found to have anterolateral STEMI. Despite of thrombolysis she had a sudden cardiac arrest.Resucitation failed and unfortunately she was succumbed to death. Autopsy was not done as per family request. This highlights the nessacity of early renal angiogram in diagnosing PAN and severity of its nature with rapid multisystemic involvement despite of prompt treatment.