Childhood lupus nephritis: a single center experience.

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Aim: to analyze clinical, laboratory features and outcome of Belarusian children with lupus nephritis (LN) followed between 2002-2011 y.

Methods: 33 children (25 girls and 8 boys) with biopsy proven LN were observed at the Department of Pediatric Nephrology of the Republic Center Minsk, Belarus. Заболеванию предшествовали: infections in 33,3%, allergy (22,2%), photosensitivity (17%), unknown 17%, fatigue 11%.

Results. The median age at the disease onset was 13, 5 years old (9-17). The symptoms were present on average 3 months (0-96) before the diagnosis was made. The commonest presenting clinical features were: skin lesions in 20/33 (60%), arthralgias (53%), arthritis in 3/33, lymphadenopathy 33%, oral ulcers 22,2%, cardiac 21%, serositis 20%, neurological disorders 16%. Arterial hypertension was diagnosed in 26/33 (78%), renal disorders 11/32 -34% in debut, in others during one year.

Laboratory abnormalities included increased ESR (max 74 mm/h) – 94%, cytopenia 73%, low C3 59%, low C4 38%, anti dsDNA in 69%, ANA in 44%, high IgG in 59%. ACA in 34%, in 66,7% with active and in 41,6% with class IV. AntiC1qAB were positive in 66,7%, in 83,3% with active LN. Low MBL in 67% with active and 42% with class IV.

Renal biopsy revealed class II (n=7), III (n=3), IV (n=21), V (n=2), ISN/RPS, 2004 y.

Association between antiC1q and C3 (Spearman r=-0,53, p=0,037), antiC1q and ANA(Spearman r=0,58, p=0,02) and anti dsDNA(Spearman r=0,88, p<0,0001) in patients with active LN class IV could be used as a non-invasive markers in diagnostic of severe renal lesions.

9 patients were initially treated by oral corticosteroids (CS), 4 from them only with Prednisolon (Pred), 15 received puls-therapy CS and 9 puls cyclophosphamide (CYC) with plasmapheresis. Pred+AZA received 17 patients (3

as induction therapy), switched on Pred+CyA – 11. Pred+CyA – 16 patents, switched on Пред+A3A – 8. Pred+MMF (after CYC puls) 1 girl during last 12 months – positive dynamic. Leukeran+Pred -10 children. IV Ig was prescribed 13 children. Antiphosp

АФС диагностирован у 7 больных (тромбоз + АКА и/или ЛА

Two patients died, acute renal failure in 4, chronic renal failure in 7 (end stage in 1), Нарушение парциальных функций почек -5, remission during 5 years in 3.

Осложнения у наших пациентов: Экзогенный гиперкортицизм -27/32, нарушение роста и полового созревания -15/32, Стрии -17/32, Остеопороз -4, Стероидный диабет -3.