

Vogt-Koyanagi-Harada 증후군 환자에서 발생한 스테로이드 반응성 메산지움 증식성 사구체신염

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고은실, 황현철, 신석준, 박철휘, 양철우, 김용수, 장윤식, 정성진

Vogt-Koyanagi-Harada Syndrome-Associated Mesangial Proliferative Glomerulonephritis

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Introduction: Vogt-Koyanagi-Harada (VKH) syndrome is a multisystem disorder characterized by bilateral granulomatous uveitis that is often associated with neurologic and cutaneous manifestations. We describe renal pathological findings in a patient with proteinuria, hand tremor, sensorineural hearing loss, and uveitis, who was later diagnosed with VKH.

Case: A 47-year-old man presented to our clinic with proteinuria over a period of 10 months. He had complained of hand tremor for 10 months, sensorineural hearing loss for 5 months, and red eyes for 4 months which was severe in right side than left side with eyelids edema. His fundic examination revealed hyperemic and swollen optic discs with choroidal detachment. Seven months later, he was taken at emergency room presenting with severe seizure-like motion. His brain MRI imaging and CSF study did not show any abnormalities. These neurological and ophthalmological manifestations were compatible with VKH. An assessment of the renal biopsy disclosed mesangial cell proliferation, matrix expansion, interstitial mononuclear cell infiltration and fibrosis without deposition on immunofluorescence. Electron microscopy showed focal foot process effacement. With steroid pulse therapy, there was a significant decrease in proteinuria as well as improvement of neurological symptoms.

Conclusion: Here we provide the first report, to our knowledge, of renal manifestation in a patient with VKH.

Key Words: 보고트 고야나기 하라다 증후군, 사구체 신염, 단백뇨

Vogt-Koyanagi-Harada syndrome, Glomerulonephritis, Proteinuria