

## KSN 2017 Abstract

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### Clinical Characteristics in Elderly Patients Aged Over 65 Years with Biopsy-Proven Kidney Diseases

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**Objectives :** As the life expectancy increases and the aging society comes, the incidence of kidney disease is increasing in the elderly population. The purpose of this study was to evaluate the clinical and pathological spectrums of kidney disease in the elderly population.

**Methods :** We retrospectively investigated 101 patients aged over 65 years with biopsy-proven kidney disease. We analyzed the clinicopathologic manifestation, treatment strategy, and clinical course of kidney disease.

**Results :** The mean age at the time of kidney biopsy was  $71 \pm 4$  years, and 44.6% of patients had hypertension and 10.9% had diabetes. The median serum creatinine was 1.4 mg/dL (interquartile range (IQR) 0.9, 2.3). The most common clinical diagnosis was nephrotic syndrome (55%), followed by asymptomatic urinary abnormality (12%). The most common primary glomerular disease was membranous nephropathy (33%) and, secondary glomerular disease was anti-neutrophil cytoplasmic antibody (ANCA)-associated glomerulonephritis (24%). The most common pathologic diagnosis classified based on clinical diagnosis was membranous nephropathy (33%) in nephrotic syndrome, IgA nephropathy (33%) in asymptomatic urinary abnormality, ANCA-associated glomerulonephritis (67%) in rapidly progressive glomerulonephritis, IgA nephropathy (88%) in acute nephritic syndrome, and hypertensive nephropathy (25%) in chronic glomerulonephritis. Treatment strategies for kidney diseases were angiotensin converting enzyme inhibitor or angiotensin receptor blocker (48%), and immunosuppressants (48%) such as steroid, cyclosporine, mycophenolate mofetil, or cyclophosphamide. The most common disease that was completely responded among nephrotic syndromes was minimal change disease (39%). Of the 21 (21%) patients who received dialysis, 11 (52%) received dialysis due to the onset of acute kidney injury, and received maintenance dialysis without recovery. The most common cause of dialysis was ANCA-associated glomerulonephritis (38%). Death rate was 17%, and the most common cause was infection (53%).

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**Conclusions :** Kidney disease in elderly patients showed various patterns in our study. The most common indication for kidney biopsy in elderly patients was nephrotic syndrome. Nephrotic syndrome in elderly patients should be actively performed for kidney biopsy because of the high rate of complete remission when treated. All elderly patients with acute kidney injury were dialyzed and progressed to end-stage renal disease without recovery. Rapidly progressive glomerulonephritis in elderly patients should be diagnosed and treated early because the prognosis is poor.

**Keywords :** Kidney disease, elderly, biopsy, prognosis