

## 고령에서 발병한 저 보체혈증과 ANCA 동반된 Henoch-Schönlein purpura nephritis 1예

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### Elderly-Onset Crescentic Henoch-Schönlein Purpura Nephritis with Positive ANCA and Hypo-Complementemia : A Case Report

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**Introduction:** Henoch-Schönlein purpura (HSP) is a systemic vasculitic disorder and typically a disease of childhood, rarely reported in elderly. The clinical findings include palpable purpura, arthralgias, abdominal pain, and renal disease, is often triggered by antecedent infection, medication and miscellaneous factors. Multiple studies have reported more glomerulonephritis and poorer outcomes in the adult population. Although the importance of the complement activation in glomerular injury in HSP has been suggested, the complement levels and the blood pressure in those patients are usually normal. Anti-neutrophil cytoplasmic antibodies (ANCA) are associated with primary small vessel vasculitis, but the presence of ANCA in immune-complex-mediated vasculitis such as Henoch-Schönlein purpura (HSP) is very unusual.

**Case:** A 76 years old male was transferred to our hospital with 7-day history of oliguria, abdominal pain, edema and skin eruption (palpable purpura) in both leg. He had been healthy, normal renal function and urine analysis finding. 3 months ago, he was admitted to other hospital with jaundice, diagnosed early common bile duct cancer and had whipple's operation. 2 months ago, antibiotics was used because of leakage in suture of surgical operation and there was no further surgical problem. However, he had acute kidney injury (AKI), edema and purpura in both leg. Laboratory investigations showed BUN/Cr 45.7/6.4 mg/dL, 24hr urine protein 8141.4 mg/24 hr, MPO-ANCA 1:40, C3 below 78.21 and other serology finding is within normal range. Renal biopsy showed crescentic glomerulonephritis on LM, mesangial and extracapillary Ig A deposition on IF and mesangial and extracapillary electro dense deposit on EM. We started steroid therapy and hemodialysis (HD). His renal function was not improved and he has been under maintenance HD. We report a case of biopsy proven HSP associated with AKI, massive proteinuria with hypo-complementemia and anti-MPO ANCA after major operation with cancer.

**Conclusion:** This case implies that prognosis of elderly onset crescentic Henoch-Schönlein nephritis with positive ANCA and hypocomplementemia and may be poor outcome.

**Key Words:** 신라인 헤노흐 자반병, 저보체혈증, 항호중구세포질항체  
Henoch Schonlein purpura, Hypocomplementemic, ANCA