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Prevalence of hypertension in children with steroid sensitive nephrotic syndrome

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Objectives: Hypertension in children is a growing concern worldwide. Long-term steroid treatment in nephrotic syndrome (NS) may increase risk of hypertension. High blood pressure (BP) in childhood may elevate likelihood of hypertension in adulthood. Thus, it is important to determine the prevalence of hypertension in children with steroid-sensitive NS.

Methods: This was a prospective, observational study conducted in the Department of Nephrology in a tertiary care hospital in India for one year. All children suffering from NS and being treated with corticosteroids were included irrespective of age and gender. Written informed consent was taken from parent/guardian. Diagnosis of NS was made by the treating nephrologist. BP was checked on initial diagnosis and all follow-up visits in both arms and one thigh. For children less than 13 years old, diagnosis of hypertension was made when BP was above 95th percentile for their age, gender and height. For children 13 years and above, cut-off BP was set at 130/80 mm Hg. Urine samples were taken to measure proteinuria. The correlation between age of NS diagnosis and occurrence of HT was investigated. Obtained data was analysed using statistical tests.

Results: Total 63 children with SSNS were included in the study. Out of 63, 38 were male and 25 were female. 5 children were diagnosed with hypertension. Out of 5, 3 were more than 13 years old. Proteinuria was present in 2 of the 5 samples. There was a significant correlation ($P<0.05$) between age of diagnosis of NS and HT with earlier the age of onset of NS, earlier the onset of hypertension and the BP was more raised at diagnosis as compared to other children with NS.

Conclusions: In conclusion, there is high prevalence of hypertension in children with SSNS. Further prospective research is needed to establish the risk factors related to hypertension in these children.