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Evaluation of the effectiveness of induction therapy in various morphological variants of lupus nephritis

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Objectives: to evaluate the effectiveness of induction therapy strategies in pediatric lupus nephritis at various morphological presentations

Methods: retrospective analysis of 25 cases of pediatric lupus nephritis treated at local center

Results: Among the examined patients, 92% were girls (23), 8% were boys (2), aged from 2 to 16 years (average age 12.5 ± 2.5 years). Renal damage was manifested by nephrotic syndrome in 40% (in 10 children), nephritic syndrome in 44% (in 11 children), nephrotic syndrome with nephritic syndrome in 8% (in 2 children), terminal CKD was diagnosed in 4% (1 child), the debut of SLE with glomerulonephritis 4% (1 child), including positive a-DNA after a few years. Cyclophosphamide in combination with pulse therapy with methylprednisolone was received by 76% (19 patients), pulse therapy with methylprednisolone alone by 24% (6 patients). Complete/partial remission was achieved: Class II 8%, Class III 16%, class IV 28%, class V 12%, and 16% no biopsy. In patients, there was an improvement in clinical and laboratory parameters, in the form of a decrease or complete regression of skin and joint syndrome, a decrease in blood pressure, proteinuria, regression of macrohematuria, microhematuria.

Absence of remission: Class II 4%, Class III 4%, Class IV 4%.

Terminal CKD developed in one child, who is currently on PD. Lethal outcome in one child, in the outcome of lupus nephritis, carditis.

Conclusions: Treatment tactics are largely determined by the data of nephrobiopsy. Nevertheless, at the present stage, it is possible to achieve remission in this contingent of patients with timely induction therapy: pulse therapy with cyclophosphamide in combination with pulse therapy with methylprednisolone. Long-term use of such selective immunosuppressors as Cyclosporine A (Sandimmun-Neoral) and mycophenolate mofetil (Cellsept) for maintenance therapy contribute to maintaining remission of lupus nephritis