

# IMMUNOSUPPRESSIVE TREATMENT IN CHILDREN WITH IgA NEPHROPATHY AND HENOCH-SCHÖNLEIN NEPHRITIS – NATIONAL STUDY

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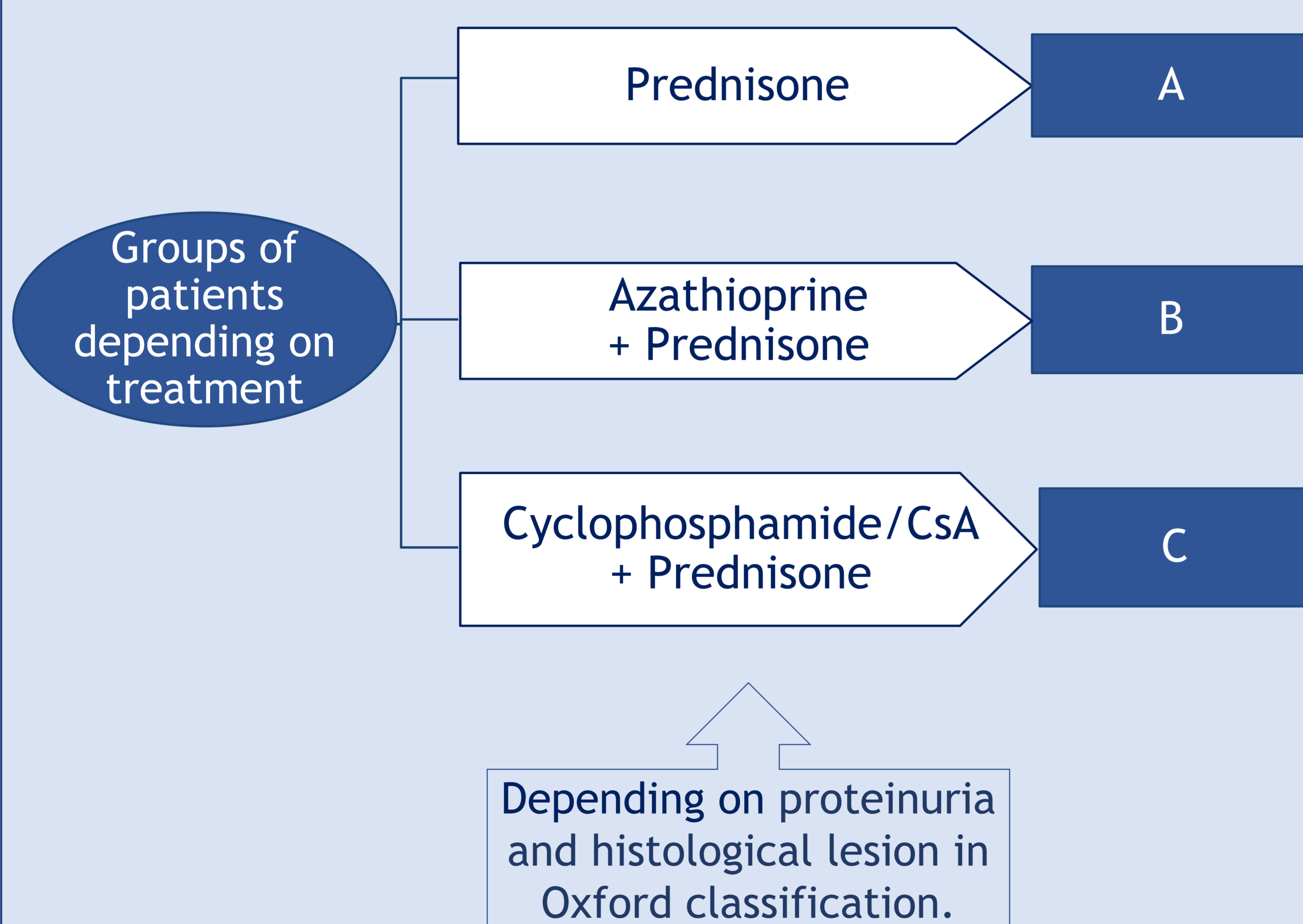
## INTRODUCTION

IgA nephropathy (IgAN) and Henoch Schoenlein nephritis (HSN) they are diseases with similar pathogenesis, IgA deposits in glomerules but different natural history.

The aim of this study is comparison of efficacy of immunosuppressive treatment based on clinical symptoms and Oxford classification in children with IgAN and HSN

## METHODOLOGY

- 163 children from group of 252 children from Polish National Registry in Children diagnosed with IgAN and HSN, recognized in renal biopsies
  - 90 HSN/73 IgAN
  - renal biopsies performed between 2000 - 2014
- Oxford classification (OC) was used to assess the severity of histopathological lesions
- proteinuria (mg/kg/day) and GFR (in Schwartz formula) at the onset of the disease (OOD) and at the end of treatment (EOT) were analyzed.
- immunosuppressive drugs (Prednisone, AZA, CYC, CsA) were used in treatment



## CONCLUSION

Immunosuppressive treatment has good effect in children with HSN and IgAN.

## RESULTS

- no significant differences in number of patients in the groups A, B, C between HSN and IgAN (fig.1).
- significantly higher proteinuria at OOD in C than B and A in HSN and IgAN
- prednisone alone and AZA+prednisone significantly decreased proteinuria in groups HSN and IgAN (fig.2).

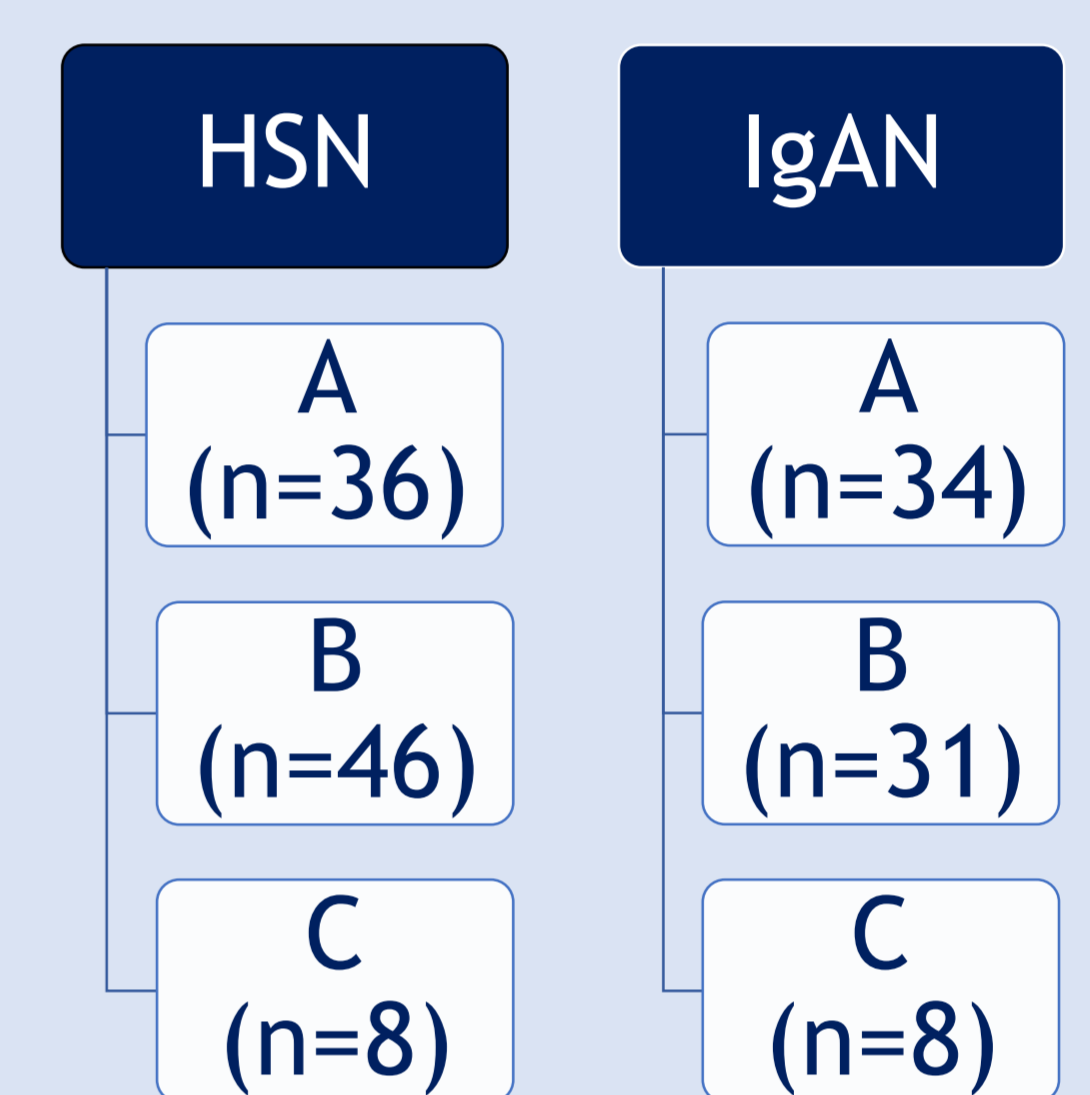
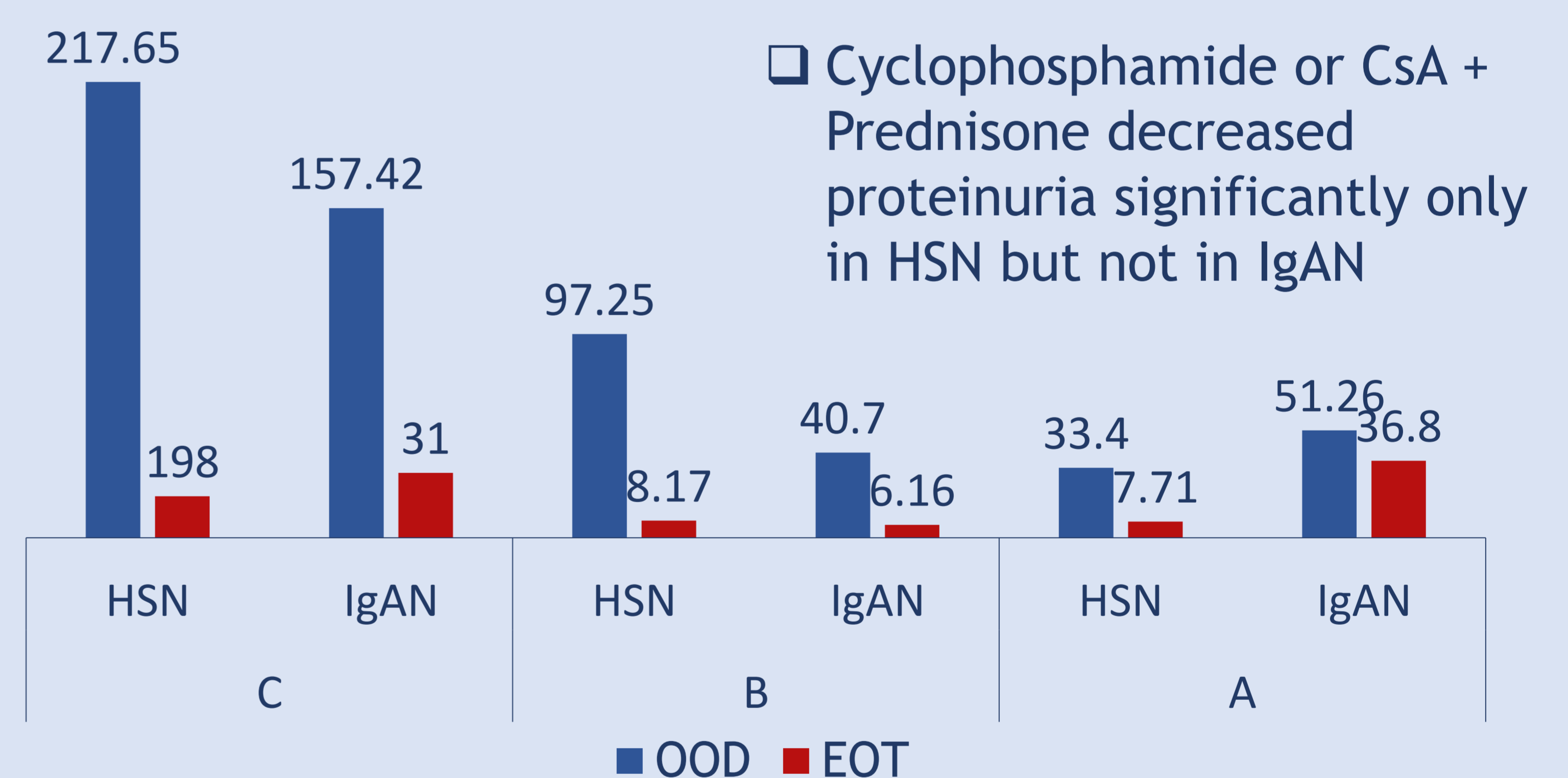


Figure 1. Differences in number of patients in A, B, C groups between HSN and IgAN.



- Cyclophosphamide or CsA + Prednisone decreased proteinuria significantly only in HSN but not in IgAN

Figure 2. Differences between proteinuria (mg/kg/d) at OOD and EOT in A, B, C groups, in HSN and IgAN.

Table 1. Results - summary.

|                 |                       | HSN            |           | p       | IgAN       |           | p     |
|-----------------|-----------------------|----------------|-----------|---------|------------|-----------|-------|
|                 |                       | OOD            | EOT       |         | OOD        | EOT       |       |
| PRED<br>n=70    | Proteinuria (mg/kg/d) | 21.5 (0-250)   | 0 (0-73)  | <0.0001 | 14 (0-500) | 0 (0-120) | 0,051 |
|                 | MEST                  | 1.64±0.79      | -         | -       | 1.33±1,08  | -         | NS    |
|                 | GFR<90 (n)            | 2              | 2         | -       | 9 (12%)    | 5 (7%)    | NS    |
| AZAPRED<br>n=77 | Proteinuria (mg/kg/d) | 42,5 (0-626)   | 0 (0-103) | <0.0001 | 18 (0-226) | 0 (0-60)  | <0.01 |
|                 | MEST                  | 1.74±0.83      | -         | -       | 1.83±1.09  | -         | NS    |
|                 | GFR<90 (n)            | 0              | 1         | -       | 10 (13%)   | 4 (6%)    | NS    |
| CYC/CsA<br>n=16 | Proteinuria (mg/kg/d) | 120 (4.2-1140) | 0 (0-92)  | <0,001  | 41 (0-967) | 25 (0-91) | NS    |
|                 | MEST                  | 2.16±1.02      | -         | -       | 1.83±1.09  | -         | NS    |
|                 | GFR<90 (n)            | 2 (25%)        | 2 (25%)   | NS      | 4 (50%)    | 2 (25%)   | NS    |