

AZATHIOPRINE VERSUS MYCOPHENOLATE MOFETIL AS MAINTENANCE THERAPY FOR LUPUS NEPHRITIS: A SINGLE-CENTRE EXPERIENCE

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INTRODUCTION

- Lupus nephritis (LN) has a relapsing nature and flares have a negative impact on the progression to CKD
- Maintenance therapy goals \rightarrow control the underlying immune process with minimal side effects
- Management of maintenance therapy in proliferative LN is still controversial: ALMS vs MAINTAIN

AIMS

Compare azathioprine versus mycophenolate mofetil (MMF) as maintenance therapy in patients with class III and class IV lupus nephritis

METHODS

Cross-sectional retrospective study. Follow-up Dec 2015: 111±55 months

66 patients with biopsy proven class III or IV NL

8 patients class III

Parcial remission N=21

MMF GROUP N=27 (41%)

COMPLETE REMISSION

- 24 hour proteinuria < 0.5g
- Normalization of renal function
- Inactive urinary sediment

PARTIAL REMISSION

- 24 hour proteinuria = 0.5–1.5g
- Improved renal function

FLARE

- De novo active urinary sediment
- 24 hour proteinuria >1.5g
- 25% increase in creatinine

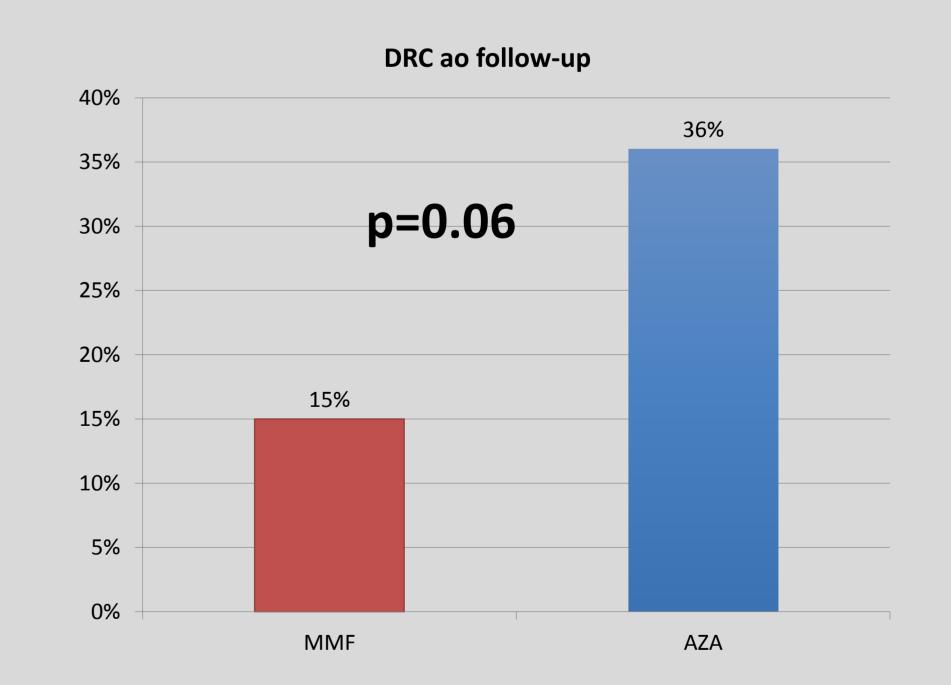
RESULTS

	MMF N=27	AZA N=39	þ
Clinical presentation			
Age at presentation (years)	24.7 ± 12.1	28.6 ± 14	NS
Female	81%	82%	NS
Clinical feature at presentation	Sub nephrotic proteinuria	Sub nephrotic proteinuria	NS
Blood and urine analysis at presentation			
Low C3 and/or C4	60/55	58/46	NS
dsDNA (IU/mL)	140 ± 255	37.3 ± 22	<0.01
Mean serum creatinine (mg/dL)	1.4 ± 1.1	1.25 ± 0.9	NS
24 hour proteinuria (g)	3.7 ± 2.9	3.1 ± 2.6	NS
Histological features at presentation			
Class III/IV (N)	1/26	7/32	NS
Crescents	56%	21%	0.003
Sclerosis	33%	26%	NS
Therapeutic response to induction			
Follow-up time	86.2 ± 50.7	128 ± 51.6	<0.01
Complete	74%	64%	NS
Partial	26%	36%	NS

Flare at 1st year: N=19 (29%)



CKD at follow-up: N=18 (27%)



PARCIAL REMISSION

- FLARES 1st year OR 16 [4.3-58.6], p<0.001
- CKD PROGRESSION OR 5.9 [1.8-19], p=0.002

CONCLUSIONS

- In our series there was no statistically significant difference between maintenance therapy with MMF vs AZA and the
 occurrence of flares in 1st year or progression to CKD
- MMF group

 more active disease with more crescents
- ullet Partial response to induction therapy ullet worse renal outcome, regardless the therapeutic group

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