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Outcome of steroid treatment of idiopathic membranoproliferative glomerulonephritis adult patients in Omdurman Military Hospital 2010 – 2015

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Background: Membranoproliferative glomerulonephritis (MPGN) is a type of glomerulonephritis caused by deposits in the kidney glomerular mesangium and basement membrane thickening, activating complement and damaging the glomeruli. MPGN is classified in to 3 types according to location of deposits, and based on etiology categorized to secondary and idiopathic.

Objective: The aim of the study is to find the outcome of treatment (remission, partial remission, relapse and progress to end stage renal disease) of idiopathic membranoproliferative glomerulonephritis, among adult Sudanese patients presenting to Omdurman Military Hospital, Renal Unit.

Materials & Methods: A retrospective study was conducted on patients with idiopathic MPGN followed up at the clinic. Forty five patients with no identifiable cause of MPGN were included. Idiopathic (MPGN) patients who have high renal profile or nephrotic range were treated by three doses of methylprednisolone 0.5 g intravenous in three consecutive days, and of corticosteroid tabs (0.5^{-1} mg/kg/day), slowly withdrawn according to the patient's response indicated by spot urine test.

Results: Out of forty five patients treatment outcomes were observed.

Conclusions: In comparison to the similar studies, the remission rate is comparable, but the renal survival rate is different.

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