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Histopathology review of idiopathic steroid resistant nephrotic syndrome and outcome in children in North-west of Iran

Mahtab Rahbar

Iran University School of Medicine, Iran

There is currently little information in the literature on the spectrum of histopathologic patterns in children presenting with the idiopathic steroid-resistant nephrotic syndrome (iSRNS) in Iran. We conducted to compare the histopathologic distribution of different subtypes' glomerular morphologic patterns in iSRNS and the clinical and biochemical parameters at the time of diagnosis and outcome of patients after immunosuppressive therapy.

Material and Methods: This cross-sectional study was done in two hundred children, aged 1-15 years, who were diagnosed for sirens and no response to 4 weeks of standard prednisone therapy (60 mg/m²/day) referred to nephropathology Department of Emam Reza hospital between 2005 and 2013. Demographic, clinical, laboratory, and histopathological data were retrieved from files and original renal biopsy reports. We discussed histopathologic diagnosis and outcome of sirens after initial therapy in patients separately. This study investigated the prognostic effects of histopathologic pattern on the outcome of iSRNS.

Results: The study included 200 children with iSRNS: 141 (70.5%) were males and 59 (29.5%) females, with a male-to-female ratio of 2.4:1. The mean age was 7.23 ± 4.37 years (range: 1-15 years). Upon pathologic investigation of iSRNS cases, focal segmental glomerulosclerosis (NOS subtype) was the first, with the highest prevalence at a rate of 102/200 (51%) and MGN was the last, at a rate of 7/200 (3.5%). Children with iSRNS secondary to MCD are more likely to achieve remission and have better long-term prognostic value ($P < 0.00$). Focal segmental glomerulosclerosis (FSGS) (Tip and Collapse subtypes) is more likely to have the worse outcome in response to immunosuppressive therapy ($P < 0.04$).

Conclusions: This study shows that the response to cyclosporine can be correlated with the underlying histopathology patterns which have been earned by adequate renal biopsy.

rahbarahbar@gmail.com

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