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Spectrum of lupus nephritis with special reference to interleukin as diagnostic marker

Usha, R G Singh and D P Karr Banaras Hindu University, India

SLE is a multi-systemic autoimmune disorder affecting multiple organs like kidney, heart, lungs, CNS. The lupus nephritis is a very important entity where kidney gets involved and variety of histological lesions are seen which has been classified in six types and treatment differs from class to class. Number of markers have been reported from the cytokines namely TN-α, IL-6, IL-10, IL-11, IL-12, etc. The present study has been planned to evaluate role of IL-6 as a diagnostic and prognostic biomarker for this condition. The study has been completed in two years' time which included 32 patients on lupus nephritis and 20 healthy controls. Female predominated in the ratio of 7:1. The clinical future was recorded and immunological, urinalysis, biochemical test and immunological test was performed and data was analyzed and result were concluded The multi-systematic involvement is a common presentation at time of inclusion. The renal involvement in the form of proteinurea, hematuria and azotemia was common finding. Patient presenting with hypertension decreased GFR and having class IV lesion showed very poor prognosis. The IL-6 was found to provide simple, non-invasive, potential biomarker of the disease activity in patients of lupus nephritis. Urinary IL-6 was significantly high in patient of lupus nephritis. It was also significantly high in patients of class IV lupus nephritis. It showed a positive correlation with serum creatinine and active urinary sediment. Patient having complete remission had normal IL-6 whereas who did not remission at higher level. The present study was carried out for a period of 2 years and the data was small. For establishing the finding of the present study, a large perspective multi centric study is recommended.

rgsingh	@bhu.	ac.ir
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