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Correlation between prognosis and response to treatment in children with FSGS

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View references (٢٦)

Abstract

To determine the prognostic value of response to treatment in patients with focal segmental glomerulo-sclerosis. FSGS includes ١٠-١٥٪ of idiopathic Nephrotic syndrome in children. Bulk of evidence supports disease relationship with immune system. Unfortunately, responses to immunosuppressive drugs are not desirable and progression to end-stage renal disease is common. We analyzed ٦٢ out of ٩٩ cases of biopsy proven idiopathic FSGS who were followed for at least ٥-years or until renal failure occurred during study. Study design was historical cohort and patients were divided into two groups: exposed (resistant to treatment) and non-exposed (responsive to treatment). Correlation between prognosis and response to treatment was statistically evaluated. P-value (٠,٠٥ and relative risk (١ was considered significant. In ٣ out of ٢٥ steroid responsive patients (١٢٪) and ٢٢ out of ٣٧ steroid resistant patients (٥٩,٥٪), disease progressed to renal failure. Disease progressed to renal failure in ٢ out of ١١ cyclophosphamide responsive patients (١٨,١٪), ١٧ out of ٢٣ cyclophosphamide resistant patients (٧٤,٣٪), and ٨ out of ١٤ cyclosporine resistant patients (٥٧,١٪). ٢ patients who responded to cyclosporine had normal renal function at the time of the last follow up. We concluded that favorable response to steroid and cyclophosphamide treatment is a protective factor against disease progression to end stage renal disease and resistance to these drugs imply a poor prognosis. For making any definite conclusion concerning response to cyclosporine treatment and prognosis, similar studies with a larger sample are required. © ٢٠٠٩ Tehran University of Medical Sciences. All rights reserved.

Author keywords

Children; FSGS; Nephrotic syn; Prognosis; Steroid resistant; Steroid responsive

Indexed Keywords

EMTREE drug terms: cyclophosphamide; cyclosporin; prednisolone

EMTREE medical terms: adolescent; article; child; female; focal glomerulosclerosis; gonadal disease; human; immune system; immunosuppressive treatment; infant; kidney biopsy; kidney failure; major clinical study; male; prognosis; treatment response

Chemicals and CAS Registry Numbers: cyclophosphamide, ٥٠-١٨-٠; cyclosporin, ٧٩٢١٧-٦٠-٠; prednisolone, ٥٠-٢٤-٨

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