

Technical Session AI – Health Sciences

AI 01 Beneficial effects of prolong steroid therapy in relapsing nephrotic syndrome: A comparison of two regimes with pre study data

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Childhood nephrotic syndrome is characterized by gross proteinuria, oedema and hypoalbuminaemia. Prolonged steroid therapy in steroid sensitive nephrotic syndrome in the initial attack results in lesser number of relapses when compared to short course of steroid. We compare the relapse rate and cumulative steroid dose in patients with relapsing nephrotic syndrome before and after joining the study, in two groups in steroid regimes of different durations i.e., prednisolone 960mg/m² over 2 months period (Gp1) and prednisolone 3100 mg/m² over 6 month period (Gp2). Subsequent relapses if any were also treated in the same manner. there were 40 children in Gp1 and 43 children in Gp2. Mean (SD) relapse rates in Gp1 2.1(1.4) and in Gp2, 2.1(1.3). Mean relapse rate in Gp1 while on the study was 2.0(1.4) and 2.1(3.6) in 1 year and 3 years of follow up. Mean relapse rate in Gp2 while on study was 0.5(0.6) and 0.5(1.2) in 1 year and 3 years respectively. Mean cumulative steroid received by the Gp1 in 1st year and the 3rd year of the study was 1839.9mg and 5490.0mg where as Gp2 had 1412.1mg and 4305.0mg respectively. In this random controlled trial of patients with relapsing nephrotic syndrome, the relapse rate of patients who received prolonged course of steroids (Gp2) compared with pre-study period was lower than in the group which received a shorter course of steroids (Gp1) and the Gp2 received a lower cumulative dose. In conclusion when compared with the pre study period and while on the study, prolonged steroid therapy group had a reduced number of relapses and reduced cumulative dose of steroids.

Keywords: Nephrotic Syndrome, proteinuria, frequent relapses, Prednisolone