

## **IS RENAL BIOPSY AN ESSENTIAL TOOL FOR INITIATING TREATMENT IN LUPUS NEPHRITIS; AN EXPERIENCE OF TERTIARY CARE CENTER IN NEPAL**

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**Introduction:** Lupus nephritis is one of the common complications of systemic lupus erythematosus. Timely treatment will decrease progression to chronic kidney disease. Treatment varies with different stages for which biopsy is needed. Controversies still exist regarding its requirement in management.

**Methods:** Retrospective study from September 2014 to August 2016 in B P Koirala Institute of Health Sciences, Dharan, Nepal among all patients with systemic lupus erythematosus and undergone renal biopsy.

**Results:** Of 92 patients, most were female 85 (92.4%) with median age 32 years. In this study, 80.4% had some clinical symptomatology. Of the clinical manifestations 41.3% had polyarthritis, edema (20.7%), malar rash (17.4%), ANA was positive in 80.4% and ds DNA in 70.7%. Renal biopsy showed a greater number of patients 27 (35%) had stage IV lupus nephritis, followed by stage I, 19 (24%) and stage II, 16 (20%) lupus nephritis. Median urinary protein in class I was 1.05 gm, class II (0.63 gm), class III (1.5 gm), class IV (2.44 gm), class V (3.99 gm) and class VI (4.7 gm). Only stage IV had kappa of 0.269 with  $p(0.003)$  showing agreement between proteinuria and histological staging which was significant with  $p(<0.005)$ . But overall kappa analysis showed none to fair strength of agreement for different stages of lupus nephritis (-0.014-0.269) with proteinuria.

**Conclusions:** Kappa (k) analysis showed none to fair strength of agreement for different stages of lupus nephritis and proteinuria. So, only proteinuria is not enough to replace the need of renal biopsy in Lupus Nephritis.