Lupus Nephritis in Males: A Comparative Analysis of Clinical and

Histopathological Features with Female

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INTRODUCTION

Lupus nephritis is a secondary glomerulonephritis which is seen in 50 to 60% of SLE and is a strong determinant of morbidity and mortality. Because of their rarity in men, systemic lupus erythematous and lupus nephritis (LN) are poorly understood in men.

AIMS AND OBJECTIVES	MATERIALS AND METHODS	
 To analyses the clinical spectrum and histopathological profile of patients of lupus nephritis and compare the differences between males and females To assess the severity of presentation of Lupus nephritis in males 	Place Of Study: Nizam Institue Of Medical Sciences	
	Study Design: Retrospective Cross Sectional Study	
	Study Duration: 2011-2022	
	Sample Size: 100 (50 Male and 50 Female)	

RESULTS

Clinical characteristics and investigations		Immunological profile					
	Male	Female		Male	Female		
Mean age	25.70 ±9.27	28.48 ±11.13	ANA positivity	80%	96%		
			Anti DsDNA	74%	90%		
LN as initial presentation	50%	30%	Low C3	90%	92%		
Most common outro	N/SK/musseuts	MCK/muss sutan	Low C4	66%	64%		
Most common extra renal manifestation	MSK/mucocuta neous manifestation (60%)	MSK/mucocutan eous manifestation (70%)	Histological classification of LN in males vs females 80.00% 72.00% 70.00% 60.00% 50.00%				
Hematological manifestation	40%	34%					
Anemia(Hb<10g /dl)	48%	60%	40.00%				
Thrombocytopenia	24%	30%	0.00%	22.00% 2.00%			
Incidence of HTN	44%	24%		III III+V IV	IV+V V		
RPRF presentation	20%	24%	 Female Male Class IV lupus as the most common histological class observed in both males and females followed by class V. Presence of crescents was seen in 24% of females and 26% of males. 22% and 28% had no IFTA among female and male cohorts. Very few patients had TMA changes (14% and 10% in females and males respectively) 				
Average proteinuria	4.13± 2.49	3.62 ± 2.28					
The mean presentation creatinine	1.82 ±1.65	1.71±2.28					

Conclusion

In our study, focusing on gender differences of clinical spectrum and histopathological profile we could conclude that men and female had a near similar presentation except for HTN and degree of proteinuria being more common and severe in males. Our studies could not demonstrate the increased severity of LN in males at the time of presentation. Assessing long term treatment outcomes and response to treatment could further clear the myth of male gender as a risk factor for severe LN.