

Nephrotic Syndrome and Cholelithiasis: A Rare Association

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Background

Nephrotic syndrome and cholelithiasis is very rare association though not unexpected. Nephrotic syndrome itself or prolonged steroid therapy can lead to persistent hyperlipidemia which may cause atherosclerosis and glomerular injury. But association of nephrotic syndrome and cholelithiasis has not been described in literature and very few cases have been reported previously.

Case

We report 8 year male child presented with history of generalized anasarca and oliguria since 7 days. Birth history is not contributory. Development history has been normal for age. On examination he had generalized anasarca with periorbital edema, abdominal distension, fluid thrill, shifting dullness and tenderness in right upper abdomen. Laboratory finding suggestive of proteinuria (3+ to 4+), hypoalbuminemia (1 gm/dl) and

hypercholesterolemia (450 gm/dl). Blood urea, creatinine, hemoglobin were normal with normocytic normochromic peripheral smear. Sonogram of abdomen reveals 2 large Gall stones with normal gall bladder and hepatic architecture. Patients have been taking steroid since age of five year during relapse. This time patient started on steroid therapy 2mg/ kg till remission occur, after then steroid were tapered over 4 week. After 2 months sonogram was repeated which shows persistent of gallstones and normal gall bladder.

Results & Conclusions

We describe here an association between asymptomatic gallstones and nephrotic syndrome of which prevalence, natural history and response to treatment are still unknown.

Keywords: Nephrotic syndrome; Cholelithiasis; Hyperlipidemia.