

Lupus Nephritis

National Kidney and Urologic Diseases Information Clearinghouse



National
Institute of
Diabetes and
Digestive
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What is lupus nephritis?

Lupus nephritis is an inflammation of the kidney caused by systemic lupus erythematosus (SLE), a disease of the immune system. SLE typically causes harm to the skin, joints, kidneys, and brain.

The causes of SLE are unknown. Many factors may play a role, including

- gender—SLE is more common in women than men
- heredity—a gene passed down by a parent
- infections
- viruses
- environmental causes

What are the symptoms of lupus nephritis?

Lupus nephritis may cause weight gain, high blood pressure, dark urine, or swelling around the eyes, legs, ankles, or fingers. However, some people with SLE have no overt symptoms of kidney disease, which must be diagnosed by blood and urine tests.

How is lupus nephritis diagnosed?

Diagnosis may require urine and blood tests as well as a kidney biopsy.

- Urine test: Blood or protein in the urine is a sign of kidney damage.
- Blood test: The kidneys remove waste materials like creatinine and urea from the blood. If the blood contains high levels of these substances, kidney function is declining. Your doctor should estimate your

glomerular filtration rate based on your creatinine score.

- Kidney biopsy: A biopsy is a procedure to obtain a tissue sample for examination with a microscope. To obtain a sample of your kidney tissue, your doctor will insert a long needle through the skin. Examining the tissue with a microscope can confirm the diagnosis of lupus nephritis and help to determine how far the disease has progressed.

How is lupus nephritis treated?

Treatment depends on the symptoms and test results. Medicines called corticosteroids can decrease swelling and inflammation by suppressing the immune system. Additional immunosuppressive drugs related to cancer and drugs used to prevent rejection of organ transplants may also be used. In severe cases, your doctor may prescribe cyclophosphamide (Cytoxan, Neosar) or mycophenolate (CellCept). Newer experimental treatments include a drug called rituximab (Rituxan).

You may need one or more medicines to control your blood pressure.

You may need to limit protein, sodium, and potassium in your diet.

For More Information

Lupus nephritis is also classified as a glomerular disease. For more information, see the National Kidney and Urologic Diseases Information Clearinghouse publication *Glomerular Diseases*.

The National Institute of Arthritis and Musculoskeletal and Skin Diseases has online publications about *Systemic Lupus Erythematosus* and *The Many Shades of Lupus* (easy-to-read).



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More information is also available from

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You may also find additional information on this topic using the following databases:

The NIDDK Reference Collection is a collection of thousands of materials produced for patients and health care professionals, including fact sheets, brochures, and audiovisual materials. Visit www.catalog.niddk.nih.gov/resources.

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The National Kidney and Urologic Diseases Information Clearinghouse (NKUDIC) is a service of the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK). The NIDDK is part of the National Institutes of Health of the U.S. Department of Health and Human Services. Established in 1987, the Clearinghouse provides information about diseases of the kidneys and urologic system to people with kidney and urologic disorders and to their families, health care professionals, and the public. The NKUDIC answers inquiries, develops and distributes publications, and works closely with professional and patient organizations and Government agencies to coordinate resources about kidney and urologic diseases.

Publications produced by the Clearinghouse are carefully reviewed by both NIDDK scientists and outside experts. This publication was reviewed by James E. Balow, M.D., Chief, Kidney Disease Branch, NIDDK.

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