

Nephrotic Syndrome

Urine Protein : Creatinine >200mg/mmol AND Plasma Albumin <25g/L

Assessment

Observations including:
Weight, Height, BP, HR, CRT,
RR, Temperature

Clinical examination Including:
Pulse Volume, JVP, Oedema (facial, pedal, genital, ascites,
plural), input/output. Atypical features e.g. rash / arthralgia

Assess for common
Complications



Nephrology referral

- Age: <12m or >10y.
- Macroscopic haematuria.
- Persistent hypertension: systolic >95th centile over 3 readings
- Evidence of systemic disease e.g. HSP, SLE
- Renal failure
- Low serum C3 or C4.
- Steroid resistance for > 4 weeks
- Intravenous Albumin needed



Investigations

- Urine dip
- Urine protein : creatinine ratio
- U & E's
- Plasma albumin
- FBC
- Varicella antibodies (even if history positive)
- ASOT, anti-DNAse B
- C3/C4
- Other investigations if indicated (e.g. ANA)
- Cultures and CRP (if febrile)



Complications

Hypovolaemia

urine Na if in doubt

Infection

Fever,
Peritonitis/AbdoPain

Thrombosis

Neurology - Venous sinus thrombosis,
Limb - DVT

Management

Steroids: first presentation*

- 60 mg/m² (max 60 mg) daily for 4weeks
If in remission after 4 weeks wean to.
- 40 mg/m² (max 40 mg) Alternate Days for 4wks
Then Stop.

*see full guideline for relapse regime

Penicillin V

<5yrs 125mg bd
>5yrs 250mg bd

Continue until in remission

Albumin

4.5% or 20%

See full
Guideline for details

Ward Management

- Do not fluid restrict or give diuretics
- Normal protein intake
- Restrict salt intake
- Daily weight and urine dipstick
- Strict input / output chart



Discharge Criteria

Euvolemic
No Evidence of Infection

Parents understand condition and able to manage at home
(PIER patient record book and www.infokid.org.uk)

No evidence of thrombosis
No Atypical Features

Remission

Dipstick protein negative
or
trace for 3 consecutive days

Relapse

Dipstick 3+ or more for 3 consecutive days
or
Dipstick proteinuria 3+ to 4+ with oedema,
Having previously been in remission

Steroid Dependence

2 consecutive relapses occurring during corticosteroid therapy
or
within 14 days of stopping corticosteroids.

Steroid resistance

Failure to achieve complete remission after 8 weeks of prednisolone at 60 mg/m²/day

Frequent Relapse

2 or more relapses within 6 months of the initial response
Or
3 or more relapses within any 12 month period.