

## Antiphospholipid syndrome nephropathy associated with SLE treated with rituximab : a case report

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**Background:** Antiphospholipid syndrome (APS) nephropathy is an autoimmune disease that can be accompanied by systemic lupus erythematosus (SLE). Here, we report a case of APS nephropathy treated with rituximab in a SLE patient with recurrent vascular thrombosis.

**Case Presentation:** A 52-year-old woman was referred to our nephrology clinic for the evaluation of azotemia and proteinuria. She had experienced spontaneous abortion at 28 years of age and was diagnosed with right popliteal thrombosis at 43 years of age. She was diagnosed with left pulmonary artery thrombosis and SLE at 45 years of age. She was undergoing anticoagulant and immunosuppressive therapies during regular visits to the rheumatology clinic prior to admission. On her last visit of the rheumatology clinic for routine check-up, she had mild bilateral lower-limb pitting edema, impaired renal function, and proteinuria. She was then admitted to investigate the cause of the impaired renal function and proteinuria. Renal biopsy revealed arteriolar wall thickening with thrombi in the capillary lumina and marked inflammatory cell infiltration in the interstitium. Warfarin and high-dose corticosteroids were administered. Intravenous rituximab (500mg) was also administered twice at 4 week intervals. Her renal function did not worsen any further, and her proteinuria decreased.

**Conclusion:** We report a case of APS nephropathy successfully treated with rituximab in a patient with SLE who had progressive renal insufficiency.

