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Penulis :
Mohammad Sjaifullah Noer

Long Versus Standard Initial Steroid Therapy for Children with Idiopathic Nephrotic Syndrome

Abstrak :

Objectives: Two regimens of steroid treatment for the first episodes of idiopathic nephrotic syndrome in children were compared to address whether a longer initial course provides superior protection against relapse without increased adverse effects. The standard regimen consisted of prednisone 60 mg/m2 or 2 mg/kg per day for 4 weeks, followed by 40 mg/m2 or 1.5 mg/kg alternate-day prednisone for 4 weeks. The long regimen consisted of daily prednisone of 60 mg/m2 or 2 mg/kg for 6 weeks, followed by alternate-day prednisone 40 mg/m2 or 1.5 mg/kg for 6 weeks. Methods: A randomized clinical trial was conducted to children with nephrotic syndrome hospitalized at Department of Child Health Dr. Soetomo Teaching Hospital Surabaya. All patients were followed one year minimally after the treatment was stopped. Results: Eighty-one children with nephrotic syndrome aged 2-15 years old were randomized into 33 children receiving long (12-week) and 48 children receiving standard (8-week) initial steroid therapy. The time to first relapse in the long regimen group and standard group was 272.28 ± 158.76 days and 238.02 ± 144.28 days, respectively (p = 0.32). The percentage of patients with no relapse in 6 and 12 months after initial prednisone withdrawal was 75.8% and 60.6% in the long regimen group and 66.7% and 54.2% in the standard group, respectively. The percentage of children with 1 relapse in 6 and 12 months after initial prednisone withdrawal was 21.2% and 21.2% in the long regimen group and 33.3% and 29.2% in the standard group, respectively. The percentage of patients with 2 relapses in 6 and 12 months was 3.0% and 12.1% in the long regimen group and 0% and 14.6% in the standard group, respectively. No significant difference showed between the two groups (p = 0.51). Conclusions: The long initial prednisone therapy may delay occurrence of the first relapses and reduced the subsequent rate of relapses compared to the standard regimen, but statistically there were no significant differences.

Keyword :

idiopathic nephrotic syndrome, prednisone, initial steroid therapy

Daftar Pustaka :

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