

Abstract:

Anti-glomerular basement membrane (Anti-GBM) disease, a rare autoimmune disorder, primarily presents as rapidly proliferative glomerular nephritis with potentially devastating consequences for the kidneys. This case presentation describes a patient with an atypical course of Anti-GBM disease, marked by intermittent hematuria and nephrotic-range proteinuria. Despite initial treatment with plasma exchange and immunosuppressive therapy, the patient's response was poor, leading to a fatal outcome. The case underscores the importance of early recognition and intervention in Anti-GBM disease, as well as the complexity of managing atypical presentations.