

Abstract

Henoch Schonlein Purpura (HSP) is a small vessel systemic vasculitis results from the deposition of predominantly immunoglobulin A (IgA) predominantly in joints, skin gastrointestinal tract and kidneys. The disease is common among children but can occurs in adults in a complicated manner. Relapses of HSP are common among children as well as adults, and main risk factors are age, persistent purpura, gastrointestinal manifestations and an underlying illness. Relapsing HSP is commonly associated with a worse renal outcome and the prognosis also depend on the extent of renal involvement. Usually relapses occur in one third of patients within four months of the onset of illness. Here I describe a case of a relapse of HSP in an adult, which was associated with nephritic range proteinuria and renal dysfunction. The condition was poorly responded to systemic glucocorticoids, but responded well to intravenous cyclophosphomide with a marked improvement of proteinuria and renal functions.