

Abstract

C3 glomerulopathies are rare and present as proteinuria, nephrotic range proteinuria, hematuria, and hypertension, raised serum creatinine. Here we report young female presenting with nephrotic range proteinuria with active sediments with hypertension, history of skin sepsis and migratory arthralgia. Differentiation of C3 Glomerulonephritis (C3GN) and Post infectious glomerulonephritis (PIGN) challenging but it is important to differentiate. To differentiate PIGN from C3GN immunofluorescence and electron microscopy is useful