Abstract

Renal amyloidosis is characterized by deposition of amyloid fibrils in kidney tissues leading to renal failure. Patients will show features of nephrotic syndrome at presentation. We report a patient who presented with oedema and heavy proteinuria and found to have AL amyloidosis. Patient was in end stage renal failure at the presentation. He did not show clinical features of other organ involvement related to amyloidosis. Diagnosis was confirmed by renal biopsy which showed apple green birefringence under polarized light with Congo red staining. Serum free light chain assay showed increased kappa light chains. He was started treating with bortezomib, cyclophosphamide and dexamethasone along with haemodialisis.