Dear Sir,

Membranoproliferative glomerulonephritis (MPGN) with subendothelial deposits (type I) is a well-defined clinicopathological entity [1] which although it may be associated with several conditions [2], is usually idiopathic [3]. Many cases of GN related to chronic hepatitis B virus (HBV) infection have been classified as MPGN and the etiologic role of HBV in MPGN has been considered. Rollino et al. [3] have recently described the association of hepatitis C virus (HCV) infection and membranous nephropathy, stressing the importance of systematic research of HCV antibodies in order to identify one more causal factor of this nephropathy. We present a patient with HCV infection and type I MPGN.

A 28-year-old previously non transfused woman, consulted her physician in September 1990 because of asthenia, anorexia and weight loss during the preceding month. She did not have arthralgias, Raynaud’s phenomenon or cutaneous lesions. On physical examination blood pressure was 130/80 mm Hg, the liver was not palpable and she did not have edema. Analytical studies disclosed serum creatinine 0.7 mg/dl, proteinuria 19 mg/kg/day and urine red blood cells 375,000/min with hyaline and hyaline-granular casts. Alanine aminotransferase (ALT) was 649 U/l, total serum bilirubin 0.9 mg/dl, serum albumin 32 g/l and total protein 62 g/l. Serum IgG and IgA levels were in the normal range (1,070 and 113 mg/dl, respectively) and IgM was 348 mg/dl (normal 70-280 mg/dl). Serum complement...
levels were reduced: C3 50 mg/dl (normal 55-120 mg/dl), C4 2.7 mg/dl (normal 10^15 mg/dl) and CH50 25 UH50 (normal 150-250 UH50). Rheumatoid factor was 86 IU/ml (normal < 40 IU/ml) and a polyclonal mixed (IgM-IgG) cryoglobuline-mia was detected. Antinuclear antibodies, virus B markers (HBsAg, HBcAb and HBsAb) and IgM antihepatitis A virus yielded negative results. The anti-HCV test was positive. The presence of HCV antibodies was analyzed using a second generation ELISA tests (c200, c22-3) and confirmed with second generation RIBA tests (cl00-3, 5-1-1, c33c, c22-3) developed by Ortho Diagnostic Systems (Raritan, NJ) and Chiron Corporation (Emeryville, Calif.), respectively. In February 1991, the ALT level


Book Review

Jerome G. Porush Pierre F. Faubert

Renal Disease in the Aged

Little Brown, Boston 1991. IX+ 400 pp.; E46.00

ISBN 0-316-71401-1

This is a serious book written by the two authors in its entirety. It covers the literature well as well as citing the authors’ vast experience. The advice given is sound. The book is suitable for fellows in nephrology as well as internists and geriatricians. The writing is lucid, the printing is clear and pleasant and the price is reasonable.