Searching for Hepatitis C Virus Antibodies in Chronic Primary Glomerular Diseases

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Dear Sir,

Hepatitis C virus (HCV) infection may be associated with immunologically mediated renal disease [1]. Membranous nephropathy [2] as well as cryoglobulinemic and non cryoglobulinemic membranoproliferative glomerulonephritides [1, 3,4] have been linked with HCV. The previously reported patients had mild abnormalities in liver function with varying degrees of chronic active hepatitis in the liver biopsy specimen. On the other hand, a low prevalence of HCV antibodies has been found in primary glomerulonephritis in France [5]. We, therefore, looked for HCV antibodies in 70 adult patients with biopsy-proven chronic primary glomerular diseases (table 1). All patients were negative for hepatitis B surface antigen. We found that only 1, male patient (aged 67 years) suffering from IgA nephropathy had HCV antibodies by RIBA-2. He was symptom free, and the alanine aminotransferase values were within the normal range. A past history of hepatitis B virus infection (anti-HBs/anti-HBc) was absent, and there were no evident risk factors for HCV infection. HCV RNA by polymerase chain reaction was negative. As recently pointed out by Alberti et al. [6], HCV RNA is a sensitive and specific marker of liver disease in anti-HCV-positive patients, with findings suggesting that HCV-RNA-negative subjects with normal alanine aminotransferase levels have no liver damage. Therefore, our patient may have recovered from HCV infection. In this context, a possible etiological role of HCV in the pathogenesis of IgA nephropathy remains to be elucidated.

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