

### Henoch-Schonlein purpura in children. Influence of age on the incidence of nephritis and arthritis

Reply from the Author

To the editor

We read with interest the article by Hamdan and Barqawi.<sup>1</sup> They reported that older children had a higher incidence of both nephritis and arthritis. We earlier reported that an older age (>10 years) was associated with a higher incidence of nephritis (30% versus 12%,  $p=0.001$ ), but the incidence of arthritis was less frequent in Henoch-Schonlein purpura (HSP) children with nephritis (50% versus 70%,  $p=0.003$ ).<sup>2</sup> When we performed a multivariate analysis, the existence of arthritis was protective for nephritis (odds ratio 0.35, 95% confidence interval 0.18-0.7,  $p=0.003$ ).<sup>2</sup> Kaplan et al,<sup>3</sup> also showed that the presence of persistent rheumatoid-like arthritis in patients with systemic lupus erythematosus (SLE) was less likely to develop nephritis, than those with no arthralgia or no objective arthritis. Although some authors had suggested that the presence of rheumatoid factor (RF) in the serum of patients with SLE protects them from the development of nephritis,<sup>4</sup> RF showed only a weak inverse relationship to nephritis in Kaplan et al's study ( $p=0.064$ ).<sup>3</sup> In HSP, Saulsbury<sup>5</sup> showed that no patients had RF of the IgG or IgM isotypes, whereas IgA RF was found in 13 (54%) of the HSP sera. However, there has been no study on the protective role of RF in the development of nephritis in HSP. Therefore, further studies should be performed to evaluate the relationships among age, arthritis, and nephritis in a large number of patients with HSP.

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We would like to thank Dr. Shin and Dr. Lee for their comments on our published paper. In our study, we did not observe that the incidence of arthritis was less frequent in HSP patients with nephritis. A larger prospective study would help to study this relationship.

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### References

1. Hamdan JM, Barqawi MA. Henoch-Schönlein purpura in children. Influence of age on the incidence of nephritis and arthritis. *Saudi Med J* 2008; 29: 549-552.
2. Shin JI, Park JM, Shin YH, Hwang DH, Kim JH, Lee JS. Predictive factors for nephritis, relapse, and significant proteinuria in childhood Henoch-Schönlein purpura. *Scand J Rheumatol* 2006; 35: 56-60.
3. Kaplan D, Ginzler EM, Feldman J. Arthritis and nephritis in patients with systemic lupus erythematosus. *J Rheumatol* 1991; 18: 223-229.
4. Helin H, Korpela M, Mustonen J, Pasternack A. Rheumatoid factor in rheumatoid arthritis associated renal disease and in lupus nephritis. *Ann Rheum Dis* 1986; 45: 508-511.
5. Saulsbury FT. IgA rheumatoid factor in Henoch-Schönlein purpura. *J Pediatr* 1986; 108: 71-76.