

## 신장이식 후 발생한 루푸스양 증후군 1예

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## A Case of Lupus-Like Syndrome after Kidney Transplantation

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Systemic erythematous lupus is a systemic inflammatory autoimmune disease that develops from drug, viral, or chemical irritants. We report a case of lupus-like syndrome after kidney transplantation with an unknown cause. A 55-year-old woman was admitted with severe myalgia, fever, and arthralgia 2 days previously. She had received a kidney transplantation 8 years ago, because an acute kidney injury had progressed to chronic kidney disease. After transplantation, she had no problems. We performed blood, urine, and sputum cultures but could find no microorganisms. We suspected a connective tissue disease, such as adult Still's disease, and performed autoantibody testing. As a result, antinuclear antibody was positive, and we diagnosed her with lupus-like syndrome due to an unknown cause. We increased the prednisolone dose and her symptoms improved.

**Key Words:** Systemic lupus erythematosus, Connective tissue diseases, Kidney transplantation

**중심 단어:** 전신홍반루푸스, 결합조직병, 신장이식

## 서 론

## 증 례

환 자: 55

주 소: 2

과거력: 8

(1).

8

8

현병력:

5

2

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cyclosporine 150 mg mycophenolic acid  
720 mg prednisolone 5 mg  
신체검사: 130/80 mmHg 98/  
20/ , 39°C

검사소견: 139 g/dL, 10140 mm<sup>3</sup> (95.8%, 3.5%), 145,000 mm<sup>3</sup>, aspartate aminotransferase/alanine aminotransferase (AST/ALT) 31/57 IU/L, / 6.2/ 3.3 g/dL, 0.8 mg/dL, C-reactive protein (CRP) 4.3 mg/dL (0~0.8), 12/1.1 mg/dL, cyclosporine 186 ng/mL (fluorescence polarization immunoassay) . 20

치료 및 경과: , ceftriaxone 2 g 1 (acetaminophen) 650 mg 8 4

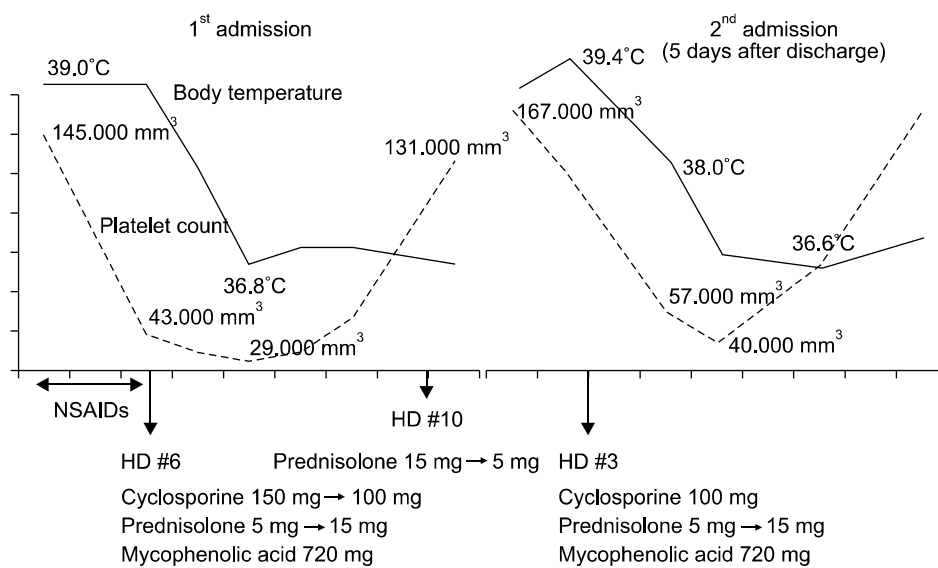
3 5 mm<sup>3</sup>, 3,940 mm<sup>3</sup>, 29,000 mm<sup>3</sup>, AST/ALT 44/61 IU/L cyclosporine 150 mg 100 mg

pre-dnisolone 5 mg 15 mg 6 7 10 13.5 g/dL, 16,600 mm<sup>3</sup>, 131,000 mm<sup>3</sup> cyclosporine 100 mg mycophenolic acid 720 mg prednisolone 15 mg 5 mg 5

147/68 mmHg 114/ , 20/ , 39.2°C . 11.1 g/dL, 4,440 mm<sup>3</sup> ( 83.6%, 11.8%), 57,000 mm<sup>3</sup>, AST/ALT 45/75 IU/L, / 1

5.7/2.4 g/dL, 1.8 mg/dL, CRP 12.7 mg/dL , CRP ceftriaxone 2 g 1 (ferritin) 2,101 ng/mL (10~291), 1 : 80 cytoplasmic 12.4 IU/mL (< 14 IU/mL) , dsDNA 4.1 IU/mL (0~7) , Smith Ab lupus anticoagulant , histone C3 69 mg/dL (90~180), C4 8 mg/dL (10~40) , prednisolone 3 prednisolone 15 mg , prednisolone 5 8 10.8 g/dL, 7,680 mm<sup>3</sup>, 166,000 mm<sup>3</sup>, CRP 1.0 mg/dL cyclosporine 100 mg mycophenolic acid 720 mg prednisolone 15 mg (Fig. 1).

1 1 : 160 cytoplasmic dsDNA 6.2 IU/mL (0~7) , histone C3 82 mg/dL (90~180), C4 8 mg/dL (10~40) , cyclosporine 90 ng/mL cyclosporine 100 mg 125 mg , mycophenolic acid 720 mg 1,080 mg , prednisolone 15 mg 5 mg . 1 dsDNA 2.0 IU/mL (0~7) , histone C3 88 mg/dL (90~180), C4 8 mg/dL (10~40) . 1



**Fig. 1.** The clinical course and treatment.

## 고 찰

- Dermatol 2004;22:157-66.
- 6) Shen GQ, Shoenfeld Y, Peter JB. Anti-DNA, antihistone, and antinucleosome antibodies in systemic lupus erythematosus and drug-induced lupus. Clin Rev Allergy Immunol 1998;16:321-34.
  - 7) Goral S, Ynares C, Shappell SB, Snyder S, Feurer ID, Kazancioglu R, et al. Recurrent lupus nephritis in renal transplant recipients revisited: it is not rare. Transplantation 2003;75:651-6.
  - 8) Nyberg G, Blohme I, Persson H, Olausson M, Svalander C. Recurrence of SLE in transplanted kidneys: a follow-up transplant biopsy study. Nephrol Dial Transplant 1992;7:1116-23.
  - 9) Signori Baracat AL, Ribeiro-Alves MA, Alves-Filho G, Mazzali M. Systemic lupus erythematosus after renal transplantation: is complement a good marker for graft survival? Transplant Proc 2008;40:746-8.
  - 10) Stinton LM, Barr SG, Tibbles LA, Yilmaz S, Sar A, Benediktsson H, et al. Autoantibodies in lupus nephritis patients requiring renal transplantation. Lupus 2007;16:394-400.
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