

## Correspondence

### Comment on: Renal histopathology spectrum in children with kidney diseases in Saudi Arabia

To the Editor

It is with great interest that I have read the recent publication by Alhasan et al<sup>1</sup> entitled Renal histopathology spectrum in children with kidney diseases in Saudi Arabia, 1998-2017.

The authors found a considerable shift in frequency of glomerular disease subtypes after analyzing 326 renal biopsies during the study period and clearly discussed some limitations of their study.

I highly appreciate their work which is well-written and very useful to pediatric nephrologists; however, there are some points need further elaboration.

First, the authors referred to 2 previous studies which included both adult and pediatric cases, however, a previous study among children in Saudi Arabia has been published by Al-Sabban<sup>2</sup> in 1997 who found high prevalence of focal segmental glomerulosclerosis among 376 cases. It would very helpful if the authors compared their findings with such study.

Second, the authors used the term mesangioproliferative glomerulonephritis which is an old term and currently considered as a pattern of glomerular injury<sup>3</sup> and not specific diagnosis. Therefore, it would be very useful if such cases were reclassified.

Third, the authors found that Alport syndrome was confirmed by renal biopsy in 8 patients (2.5%), however, this information was missing in table 2 which described all 182 cases of glomerular diseases in the study. This needs further clarifications since it might has effect on frequency of other diseases.

Finally, in the result lupus nephritis accounted for 20.7% of cases of secondary glomerulonephritis. However, in figure 2 it represented 69.8% which needs to be corrected.

Also, I would consider postinfectious glomerulonephritis as a primary glomerular disease as well as glomerulonephritis in patients with Henoch-Schönlein purpura because it is indistinguishable form IgA nephropathy and such changes might have consequences in proportions of glomerular diseases.

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*Reply from the Author*

We would like to thank Dr. Turki Al-Hussain for his interest in our article entitled “Renal histopathology spectrum in children with kidney diseases in Saudi Arabia, 1998-2017”.<sup>1</sup>

In response to the first comment, actually in the discussion section we have include only children studies,<sup>4,5</sup> as well as mixed studies that includes adult and children and we have outline this. In regard to the second comment, the author is absolutely correct and as the study includ pathology reports done more than two decades, we classified the histologic findings according to Revised Protocol for the Histological Typing of Glomerulopathy.<sup>6</sup> Regarding the third comment, actually Alport syndrome as per the classification we used is not part of primary glomerulopathy and consider to be part of hereditary glomerulopathy, this it has been outline clearly in method section. For the last comment, we mean from the total number of our cohort, and actually should be 29%. We thank the author for his valuable comments.

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## References

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