# FCGG Renal Biopsy Network: first epidemiological report on pediatric renal disease in Flanders

Sevasti Karamaria<sup>1</sup>, Johan De Meester<sup>2,6</sup>, Amélie Dendooven<sup>1,3</sup>, Elena Levtchenko<sup>4</sup>, Noel Knops<sup>4</sup>, Koen Van Hoeck<sup>3</sup>, Dominique Trouet<sup>3</sup>, Reiner Mauel<sup>5</sup>, Ben Sprangers<sup>4</sup>, Wim Laurens<sup>2</sup>, M. Couttenye<sup>3,6</sup>, Johan Vande Walle<sup>1</sup>, on behalf of FCGG working group

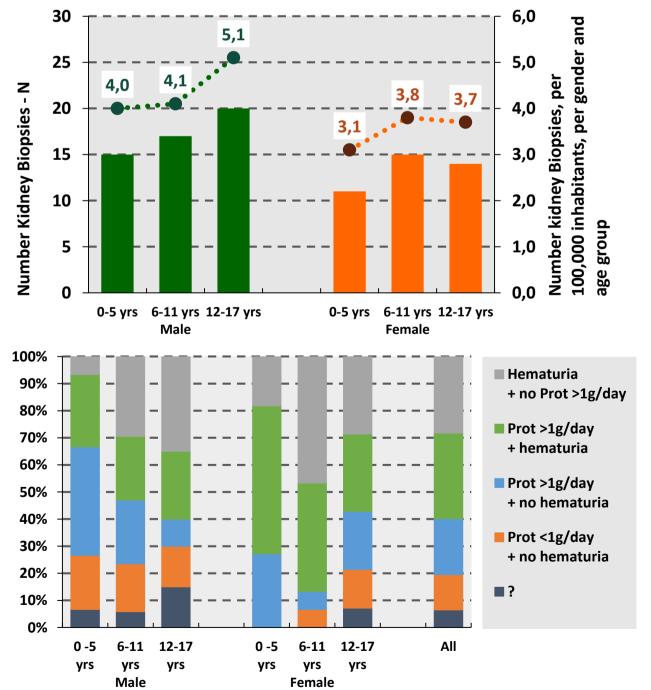
<sup>1</sup>UZ Gent, <sup>2</sup>AZ Nikolaas, Sint-Niklaas, <sup>3</sup>UZ Antwerpen, <sup>4</sup>UZ Leuven, <sup>5</sup>UZ Brussel, <sup>6</sup>Nederlandstalige Belgische Vereniging voor Nefrologie [NBVN]

### Introduction

- ❖ The Flemish Collaborative Glomerulonephritis Group (FCGG) was founded in 2016 as a collaboration between renal pathologists and nephrologists, within NBVN organization.
- The Renal Biopsy Network project consists of the registration of all native kidney biopsies within NBVN, uniformly collecting and/or using
  - basic patient data
  - semi-structured information on the kidney disease
  - · a well-structured histopathology report
  - a comprehensive diagnosis list of kidney pathology, newly designed for this project
  - the ERA-EDTA clinical renal diagnosis list.
- All information is entered and monitored by 3 data entry centers.

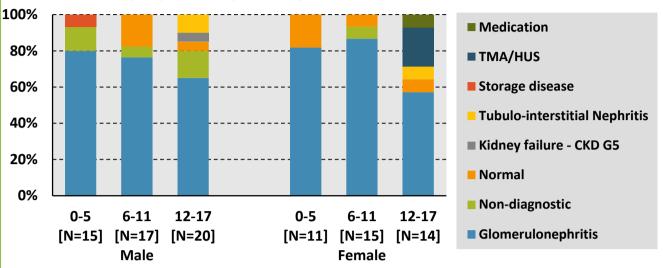
## **Renal Biopsy Network - registry**

- ❖ In 2017 and 2018, 1385 first kidney biopsies were registered, or 10.5 per 100,000 inhabitants per year.
- ❖ 92 biopsies (6,6%) were done in pediatric patients (age <18 years), or 3.6/100,000 inhabitants per year. There were more biopsies in boys (N=52) than in girls (N=40). Kidney disease presented mainly either as proteinuria >1g/day, or hematuria, or hematuria and proteinuria >1g/day; some age/gender categories showed a distinct pattern.

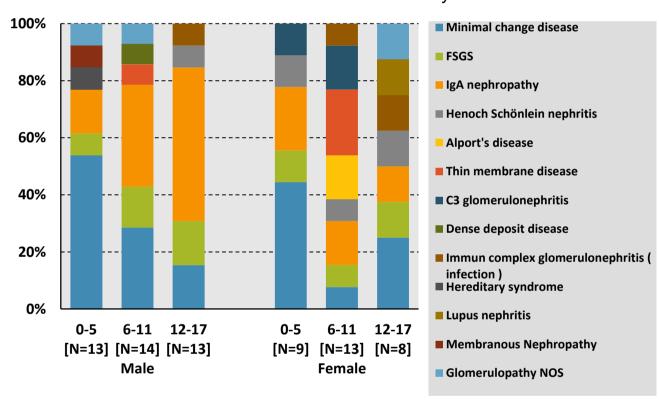


#### Results

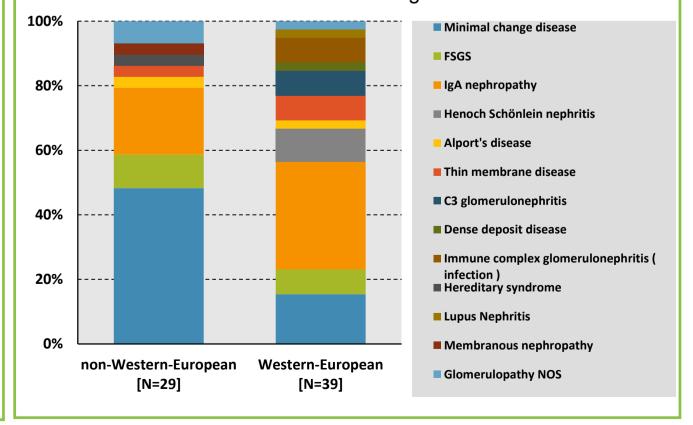
❖ In each age/gender group, glomerulopathy was most common.



- The Glomerulopathy spectrum differed among the age/gender groups.
  - 0-5 years: mainly minimal change disease with a nephrotic syndrome
  - 6-11 years: mainly diseases with hematuria, such as IgA-mediated diseases and Glomerular Basal Membrane related-diseases
  - 12-17 years: greater impact of gender =
    - Boys: almost 100% IgA nephropathy
    - Girls: more diverse collection of kidney diseases



Children of Western-European descent presented with hematuric renal diseases, whereas those without a Western-European descent suffered from a minimal change disease.



## **Conclusion**

- > The FCGG network provides an excellent cross-talk between renal pathologists and nephrologists.
- > For the first time reliable estimates of pediatric renal diseases based on histology are available.
- ➤ Genetic analyses are not yet included.
- > Efforts to coordinate clinical care of pediatric nephrology in the NBVN region are ongoing.