

Tilde Kristensen

*Title: Retrospective study on relapse treatment strategies in
adult minimal change nephropathy*

Duration	October 1st – December 10th 2022
Short Bio	Minimal change disease (MCD) accounts for up to 25% of nephrotic syndrome in adults. Corticosteroids is the cornerstone in both primary treatment at the time of diagnosis, but also after relapse. Relapse of MCD is common and up to one third of patients may frequently relapse or become steroid dependent or steroid resistant. In cases with steroid resistance, other immunosuppressive treatments, e.g., calcineurin inhibitors, Rituximab or Cyclophosphamide can be used. Guidelines are unclear as to whether immunosuppressive medication is the best, and there are no randomized controlled trials to support them.
Home Institution	Aarhus University Hospital, Denmark
Host Institution	Radboud UMC, Nijmegen, The Netherlands
Project Description	The aim of the project is to describe in a retrospective setting the course of disease and treatment for adults with relapse of minimal change disease in relation to: <ul style="list-style-type: none"> • Frequency of relapses • Type and dose of medical treatment to achieve remission • Number and severity of complications to MCD and treatment e.g., cardiovascular events, malign disease, end stage renal failure, and number and type of infections in relation to treatment
Personal Statement	The fellowship provided me with a strong and well-functioning collaboration. We established a large cohort of patients with a rare disease, which is of high quality for the project. We have had a lot of high-quality discussion about the project, which has

	strengthened the results. We believe that the research will improve from our collaboration.
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