

# Current Therapeutic Strategies in Glomerulonephritis

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## Abstract

*Over the past 20 years the therapy of glomerulonephritis (GN) has evolved. Today apart from steroids and cyclophosphamide, newer agents like cyclosporine A and tacrolimus (FK506) have been reported to achieve remission (partial or complete) in patients with nephrotic syndrome due to various GN which have failed to respond to steroids and cyclophosphamide. For those patients who do not respond to any of the primary therapeutic agents, there are now other therapies available like angiotensin II converting enzyme inhibitors, angiotensin II receptor antagonists, dipyridamole, low dose warfarin including protein restriction and therapy aimed at hypercholesterolaemia in an attempt to retard progression to end stage renal failure. This paper presents a therapeutic approach for the various forms of primary GN.*

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