

Nephrotic Syndrome

Name

Instructor

Course

Date

S.K, ages 5, has an idiopathic nephrotic syndrome (nephrosis). He has generalized edema with a puffy face, distended abdomen, and edematous legs. He has gained weight but has eaten very little during the past week and has been quite irritable and lethargic. His blood pressure is normal. Laboratory tests indicate a high level of albumin, lipids, and hyaline (proteins) casts in the urine, which has a high specific gravity. Blood tests show hypoalbuminemia and elevated cholesterol level.

1. State the cause of idiopathic nephrotic levels.

Idiopathic nephrotic is a condition that is often caused by groups of disease that damage the kidney filtering system (Mubarak, 2015). Healthy glomeruli keep blood protein (albumin) from seeping into the urine. When damaged, it leads to the nephrotic syndrome where too much blood urine seeps into the urine. There are a number of diseases that lead to nephrotic syndrome, they include; membrane nephropathy, amyloidosis, focal segmental glomerulosclerosis among other diseases.

2. Describe the changes in the nephron the leads to albuminuria.

The most significant changes in nephron condition that leads to albuminuria, the changes in the glomerulus are responsible for the leaky filtration membrane in the kidney that cause increased filtration of proteins from blood tissues to the urine and leading to albuminuria.

3. Describe the characteristics of the blood and urine that distinguishes nephrotic syndrome.

When it comes to diagnosing nephrotic syndrome, the doctor usually takes a sample of blood and urine (Ali, 2012). The blood taken is examined and if found to have decreased level of protein and the results in urine examining found to have large amounts of protein then it is said that the patient is suffering from nephrotic syndrome.

4. Explain how hypoalbuminemia causes generalized edema.

Hypoalbuminemia is also present in nephrotic syndrome, where protein loss is seen due to damage of the kidney. Chronic malnutrition or protein-losing enteropathy is an indicator of low albumin level (Cameron & Glasscock, 1988). Generalized edema (swelling) is caused by hypoalbuminemia when a decrease in oncotic pressure is experienced.

5. Explain why S.K. is retaining sodium and water.

The pathogenesis of sodium and water retention is due to the edematous disorder. S.K., aged 5 is said to be suffering from edematous legs. The swelling in the legs due to blood clotting is what is referred to as the edematous leg. Blood is said to contain salt (sodium) and water. The swelling thus retains the two components in the afferent mechanism.

6. Explain why skin breakdown is common in patients with prolonged edema.

Skin breakdown is very common in patients with prolonged edema. Edema is a disorder that causes swelling mainly in the legs. The swelling expands the skin and causes rapid loss of water in turn skin droops. This skin breakdown sometimes causes injury due to expansion caused by swelling.

Reference

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