Letters and Replies

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Dialysis treatment and regulatory T cells

Sir,

We read with attention the paper by Hendrikx et al., recently published in Nephrology Dialysis and Transplantation [1].

The authors observed a lower number and an impaired function of both CD4+CD25bright+ and Foxp3+ T cells in end-stage renal disease patients, especially in haemodialysis (HD), when compared to healthy controls. These results are very interesting since it has been demonstrated that these specific T cell populations, also known as regulatory T cells (Treg), play a key role in the control of the immune function of both CD4+CD25bright+ and Foxp3+ T cells in end-stage renal disease patients, especially in haemodialysis and immune response [4], it is reasonable that the use of different membranes could play an important role in Treg cells modulation. Concerning this, our patients were treated with CU, a low biocompatibility membrane, while the devices used by Hendrikx et al. have not been reported. Moreover, it is possible that different individual and clinical factors—such as age, comorbidity, underlying nephropathy, etc.—could have effects on Treg cells, which are completely unknown so far.

In conclusion, we demonstrated that patients on HD with bioincompatible membranes (CU) present a state of chronic Treg cells induction, which is not affected by dialytic treatment. However, the contrasting results reported and the substantial lack of data about the mechanisms of Treg cells modulation in HD patients call attention to the requirement of larger studies.

Conflict of interest statement. None declared.

Editorial Note: Dr Hendrikx et al. had been invited to reply to this letter but we did not receive a response.

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Comment on ‘Membranous glomerulonephritis secondary to Borrelia burgdorferi infection presenting as nephrotic syndrome’

Dear Sir,

We read with interest the case of membranous glomerulonephritis (MGN) secondary to Borrelia burgdorferi infection reported by Dr. Papineni et al. [1]. It is indeed interesting that, after the first reports of glomerulonephritis secondary to Lyme disease [2,3], new cases of apparently...