increase in nephritogenic strains circulating in our community. There have been no recent cases of rheumatic fever.

It is important that paediatricians should still consider the possibility of post-streptococcal glomerulonephritis. Children should be investigated in a thorough and consistent manner because as well as the acute problems an accurate diagnosis is essential for long term prognosis.2

References
2 Williams W. Post streptococcal glomerulonephritis: how important is it as a cause of chronic renal diseases. Transplant Proc 1987;2(suppl 2):97-100.

C J UPTON and A R WATSON
Paediatric Renal Unit,
City Hospital,
Hucknall Road,
Nottingham NG5 1PB

Sir,

We read the article by Leung et al with special interest because post-streptococcal glomerulonephritis is also the commonest glomerulopathy in our community.1

In 1986, 57 children with acute post-streptococcal glomerulonephritis were referred to the Clinic for Children Diseases in Skopje. (A Sajkovski, V Tasić, D Kuzmanovska. Acute post-streptococcal glomerulonephritis. Abstract presented at the Third Scientific Meeting of Yugoslav Nephrologists, Sarajevo, 1987: 75.) Two of them (3.5%) presented with hypertensive encephalopathy, nine (15-8%) with cardiovascular failure, and seven (12-3%) with uraemic syndrome.

In 1982 we saw 85 children with acute post-streptococcal glomerulonephritis, of these 26 (30-6%) had hypertensive encephalopathy. The analysis of factors associated with the high incidence of acute post-streptococcal glomerulonephritis in our community showed that most of the children lived in unhygienic and very bad social, economic, and educational conditions. Preceding streptococcal infections had not been adequately treated and the signs of acute nephritis were not recognised until late; hypertensive encephalopathy then followed. Pyodermia and scabies impetiginisata are still important aetiological factors for acute poststreptococcal glomerulonephritis. Although there are a lot of differences between our communities, we think that acute post-streptococcal glomerulonephritis is still a ‘social’ disease and Leung’s overcrowded living conditions need much more explanation.