

Introduction

Systemic lupus erythematosus (SLE) is an autoimmune disorder with some unique clinical and immunological features. Patients with SLE suffer disease manifestations in different organs including skin, joints, blood vessels as well as kidneys (**Mills et al., 1994**).

The clinical presentation of lupus nephritis (LN) is highly variable, ranging from mild asymptomatic proteinuria to rapidly progressive glomerulonephritis, and the occurrence of kidney disease is the most important predictor of morbidity and mortality in patients with SLE (**Mok C.C et al., 2003**).

Several autoantibodies, especially those against double stranded DNA (anti-dsDNA), are believed to play a major role in the induction of glomerular inflammation (**Hahn B.H et al., 1998**). Raised titres of anti-dsDNA and hypocomplementaemia are reported to be associated with the activity of the disease (**Isenberg D.A et al., 1997**).

However, the lack of specificity of these biological markers for renal exacerbations has led to the search for other autoantibodies that might contribute to nephritis and help diagnose a renal flare (**Bruns A et al., 2000**).

C1q is the first component of the classical pathway of complement activation and its main function is to clear immune complexes from tissues and self antigens generated during apoptosis (**Walport M.J et al.,2001**).

Antibodies directed to C1q (anti-C1q) were reported in the serum of patients with SLE, with a prevalence ranging from 34% to 47%(**Gunnarsson I et al. ,1997**) .

It has been suggested that the presence of anti-C1q is a required condition for the development of lupus nephritis (**Fremaux-Bacchi V et al., 2002**).

Some investigators have also proposed that monitoring anti-C1q might be valuable for the clinical management of SLE patients as a non-invasive biological marker of renal disease (**Siegert CE, et al., 1998**).

In patients with systemic lupus erythematosus (SLE), the role of a renal biopsy for either diagnostic or prognostic purposes has been the source of much debate (**Neumann K et al., 1995**).

The renal biopsy in patients with lupus nephritis is important for both assessing disease and in excluding a superimposed nephritis from another cause (**Hertig A et al., 2002**).