## Percutaneous renal artery embolization in a patient with severe nephrotic syndrome which continued after the introduction of hemodialysis.

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We treated a woman with membranous nephropathy in whom serious nephrotic syndrome (NS) continued even after the introduction of hemodialysis (HD). No response was seen with conservative treatment, including administration of steroids and albumin transfusion and body fluid management with HD. Hypoalbuminemia continued, and management of her general condition was problematic because of the hypotension, edema, pleural and peritoneal effusions. We performed percutaneous renal artery embolization (RAE), voluntary urine output disappeared for a short time, and good clinical course was subsequently seen with sustainable serum albumin levels of around 3 g/dL.