Following conclusions could be drawn from the present study:-

1. Males were predominantly affected as male : female ratio was 1.8 : 1.

2. Two third of the cases were observed between age group 1-6 years.

3. Definite preponderance of cases in later half of the year. (July - December)

4. While one out of every five cases showed hypertension, it was most frequently present in membranoproliferative group followed by membranous nephropathy & focal glomerular sclerosis was least common in Minimal lesion group.

5. Hematuria was also present in one fifth of cases, but was present in all cases of membranoproliferative group and least in MCNS group.

6. 61.54% cases behaved clinically as typical minimal lesion type. In all 80% cases were having MCNS, 6.15% had membranoproliferative glomerulonephritis and FSGS each, 4.16% had mesangial proliferative and 3.07% cases had membranous nephropathy.

7. Mean age was observed to be highest in membranoproliferative glomerulonephritis followed by membranous nephropathy, mesangial proliferative, focal glomerular sclerosis and was least in MCNS.
8. Mean serum IgG levels were significantly low while mean serum IgM levels were significantly raised in nephrotic group as compared to controls. Though mean serum $C_3$ levels were also found to be low but not statistically significant.

9. Initial and persistent hypercomplementemia was mainly observed in membranoproliferative group.

10. While majority of cases responded to steroids initially, three fourth of cases responded within 2 weeks of initiation of steroid therapy. Rest one fourth cases were relatively slow responders.

11. Among slow responders incidence of tuberculosis was much higher than the rest.

12. Correlation was observed between frequent relapsers and cases having more relapses in first 6 months, cases having very low IgG levels and higher IgM levels at onset and cases having history or evidence of URI or allergic rhinitis.