

Nephropath Teaching Point 11

Banff schema for reporting of renal allograft biopsies

Nephropath teaching point 11 question provided summary of individual scores of various lesions in a renal allograft biopsy. Here is a summary of the question:

i2, ti2, t2, v2, mm0, g3, cg0, ci0, ct1, cv0, ah1, aah0, ptc2, C4d 3

i2: Interstitial inflammation 26-50% of non-scarred cortex

ti2: Total interstitial inflammation (26-50% including the scarred and non-scarred areas)

t2: Tubulitis (most active focus with 5 to 10 cells/tubular cross section)

v2: intimal arteritis with at least 25% luminal area lost in at least one arterial cross section

mmo: Absence of significant glomerular mesangial matrix expansion

g3: Glomerulitis in >75% glomeruli

cg0: No glomerulopathy, double contours in <10% of peripheral capillary loops in most severely affected glomerulus

ci0: Interstitial fibrosis in up to 5% of cortical area

ct1: Tubular atrophy in up to 25% of the area of cortical tubules

cv0: No chronic vascular changes (fibrointimal sclerosis, intimal duplication, foam cells or inflammatory cells in area of fibrointimal sclerosis)

ah1: Mild-to-moderate PAS-positive hyaline thickening in at least one arteriole

aah 0: No typical lesions of CNI arteriolopathy

ptc2: ≥10% of cortical peritubular capillaries with capillaritis, with max 5 to 10 luminal inflammatory cells

C4d 3: Diffuse C4d stain/positive: >50% of peritubular capillaries

Diagnosis:

Acute cellular rejection: Banff grade II B (v2 lesions: severe intimal arteritis), coexisting with features suspicious for an acute antibody mediated rejection (AMR): Banff grade II

Reference:

Solez K, Colvin RB, Racusen LC et. al . Banff 07 Classification of Renal Allograft Pathology: Updates and Future Directions. [*American Journal of Transplantation* 2008; 8: 753–760](#)