

Nephropath Teaching point 7:

Defining glomerular morphology in specific diseases

The question in last nephropath teaching point was regarding the specific clinical disease conditions and accompanying characteristic renal pathology. Majority of readers (45%) rightly agreed that staphylococcal sepsis is not commonly associated with MPGN. Instead Staphylococcal infections are linked with the relatively recently described entity of IgA dominant post infectious glomerulonephritis which is now known in greater detail and is also seen in patients with diabetes mellitus. A case of IgA dominant post infectious glomerulonephritis can also be viewed in this forum.

Episcleritis is an inflammatory condition affecting the episcleral tissue that lies between the conjunctiva and the sclera. Most cases are idiopathic, although up to one third have underlying systemic conditions including autoimmune disorders such as SLE, Rheumatoid arthritis, Polyarteritis nodosa, and enteropathic arthritis. Association between IgA nephropathy and episcleritis/scleritis, though not very common has been described in few reports [see Hegde et. al., Chung et. al., Nomoto et. al., Endoh et. al., Garza-Leon M et. al.]. Other disease associations included in the question including Membranous glomerulopathy and HBV infection, Cryoglobulinemia and HCV infection, Collapsing glomerulopathy and HIV, & Rheumatoid arthritis and renal amyloidosis are well known.

Posted on 05-08-2012

©www.nephro-pathology.com