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Atypical renal pathologic findings in anti-neutrophil cytoplasmic antibody associated vasculitis

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Case Study: Anti-neutrophil cytoplasmic antibody (ANCA)-associated vasculitis (AAV) is characterized by inflammatory cell infiltration causing blood vessel necrosis and cellular crescents in renal lesion. However, these findings are not always observed in renal biopsy. We report two AAV cases that had clinical features suggestive of AAV but had unusual and differing pathologic findings.

In the first case, a 69-year-old man with recent stroke was admitted because of fever and acute kidney injury (AKI). He had myeloperoxidase (MPO)-ANCA, and kidney biopsy revealed crescentic glomerulonephritis with fibrinoid necrotizing vasculitis and plasma cell infiltrated tubulointerstitium. Bone marrow biopsy revealed no evidence of plasma cell disorder. He was treated with immunosuppressant and his kidney function was partial recovered. In the second case, an 82-year-old woman with interstitial pulmonary fibrosis was transferred to the hospital because of prolonged fever and AKI. She had MPO-ANCA, and kidney biopsy revealed severe tubulointerstitial nephritis without glomerular involvement. Although she was treated with immunosuppressant and plasmapheresis, but died.

In conclusion, we reported rare renal pathologic findings of AAV. A variety of histologic lesions of AAV need to be investigated, and further pathophysiologic research is needed.