4th RPS/KUFA Satellite Meeting, Istanbul

Organized by the Renal Pathology Society. www.renapathsoc.org
Date: September 13th, following the European Congress of Pathology
Place: Istanbul; Hotel Hilton (Convention Ctr), Mercury Room (8:30am-1pm)
Registration: 8am, Mercury room, $50.
Pre-registration: contact Dr H. Liapis Liapis@path.wustl.edu after May 1st
Contact: Dr L. Barisoni (barisi01@med.nyu.edu), Chair, Education and Scientific Committee
Sponsors: KUFA & Aperio (www.Aperio.com)

PROGRAM:

Part A: UPDATE ON AMYLOIDOSES FROM THE XI INTERNATIONAL SYMPOSIUM ON AMYLOIDOSIS BY MEMBERS OF THE INTERNATIONAL SOCIETY OF AMYLOIDOSIS (ISA) AND THE RENAL PATHOLOGY SOCIETY (RPS)

Part B: CYSTIC DISEASES OF THE KIDNEY

Part C: PRESENTATION OF CHALLENGING CASES
Junior faculty, fellows and residents are encouraged to submit interesting, unusual, or not well defined cases to be presented for discussion, suggestions for work up and patient management.
See back page for details of the program
Part A: UPDATE ON AMYLOIDOSES FROM THE XI INTERNATIONAL SYMPOSIUM ON AMYLOIDOSIS BY MEMBERS OF THE INTERNATIONAL SOCIETY OF AMYL OIDOSIS (ISA) AND THE RENAL PATHOLOGY SOCIETY (RPS)

1. RENAL DISEASES WITH ORGANIZED DEPOSITS: AN ALGORITHMIC APPROACH TO CLASSIFICATION AND CLINICO-PATHOLOGIC DIAGNOSIS. Guillermo A. Herrera MD, Saint Louis University School of Medicine St. Louis, Missouri, USA, ISA/RPS

Renal disorders with organized deposits represent infrequent to rare renal diseases that require careful electron microscopic evaluation for correct diagnosis. The presentation will address the subject in an algorithmic fashion, to provide a logical approach incorporating light, immuno and ultrastructural features for the characterization of organized deposits and their clinical relevance.

2. NEW DIAGNOSTIC APPROACHES IN AMYLOIDOSIS. Helen J Lachmann MD, Amyloidosis Centre, London, UK, ISA

The advent of serum free light chain assays is an enormous advance in both the diagnosis and management of AL amyloidosis. The recognition that amyloidosis due to variants of a number of plasma proteins is both common and often displays poor penetrance highlights the importance of genetic testing. Both issues will be discussed with emphasis on their clinical relevance.

3. DIAGNOSIS AND TYPING OF AMYLOIDOSES: IMPROVEMENTS AND RECENT ADVANCES. Reinhold P. Linke MD, PhD, Reference Center for Amyloid Diseases, Martinsried, Germany (www.amymed.de), ISA

Recent improvements in the sensitivity of Congo red in the detection of amyloid and personal experience with >30 years of amyloid typing using improved immunohistochemical methods will be discussed.

4. FAT ASPIRATION BIOPSY AS AN AID IN THE DIAGNOSIS OF AMYLOIDOSIS. Gloria R. Gallo MD, New York University Medical Center, New York, USA, ISA/RPS

In good hands, the fat aspiration biopsy is the fastest, least expensive and least invasive way to establish the diagnosis of amyloidosis as well as the molecular type. Renal Pathology is the appropriate laboratory for processing and interpretation of these specimens. Methods, interpretation and results will be discussed.

5. A CALL FOR COLLABORATIVE STUDIES ON RENAL AMYLOIDOSIS: PROPOSED CLASSIFICATION AND SCORING SYSTEM. Sait Sen MD, Izmir – TURKEY, RPS

A scoring system based on the evaluation of 300 renal biopsies with amyloidosis will be presented. The amyloid scoring system was adopted from the SLE classification (2003 ISN/RPS classification). This proposed system of scoring was first presented at the World Congress of Nephrology (WCN) held in Singapore. An updated version will be presented at this meeting.

6. REPORT FROM THE DIAGNOSTIC INTERACTIVE SESSION HELD DURING THE XIth INTERNATIONAL SYMPOSIUM ON AMYLOIDOSIS. Maria M. Picken MD, PhD. Department of Pathology, Loyola University, Chicago, USA, ISA/RPS

During the XIth International Symposium on Amyloidosis, a special session was devoted to the diagnosis of amyloidosis. The goal of this session was to review current standards of diagnosis of amyloidosis and to discuss recent and future directions. The presentations and the outcome of the ensuing discussion will be summarized.

PART B: CYSTIC DISEASES OF THE KIDNEY

1. THE CLASSIFICATION OF RENAL CYSTIC DISEASES. Stephen M. Bonsib, MD, Department of Pathology, LSU Health Sciences Center Shreveport, LA. RPS

Renal cystic diseases represent a vast and diverse array of hereditary, sporadic, acquired and neoplastic disorders that effect children and adults. An effective classification schema can assist our conceptual approach to the differential diagnosis, the correct resolution of which is important for prognostic, therapeutic and family counseling implications. This presentation will review renal cystic disease classifications and will attempt to offer a new iteration that incorporates the most recent molecular information.

2. GLOMERULOCYSTIC KIDNEY DISEASE AND GLOMERULOCYSTIC FINDINGS IN RENAL BIOPSIES: DIFFERENTIAL DIAGNOSIS AND CLINICAL RELEVANCE OF PATHOLOGIC FINDINGS. Helen Liapis, Department of Pathology, Washington University, USA. RPS

Glomerulocystic kidney disease (GCKD) is defined as glomerular cysts in more than 5% glomeruli. The term does not apply to a single entity but to heterogeneous entities devised in 5 categories: a) Familial b) GCKD associated with heritable diseases such as ADPKD/ARPKD and Tuberous sclerosis c) syndromic, d) sporadic and e) acquired. Examples of these entities will be discussed.

3. CYSTIC KIDNEY DISEASES: MOLECULAR BIOLOGY AND GENETICS. Constantinos Deltas, MD, Department of Biological Sciences, University of Cyprus, GRECE

The development of cystic kidneys is the end result of diverse mechanisms and equally diverse starting points. As a clinical entity or clinical description, the term Cystic Kidney describes a very heterogeneous group of inherited kidney conditions with many genes involved. Some acquired forms also exist. The spectrum of symptoms, as well as the age of onset, varies greatly. Recent advances in molecular biology and genetics of cystic diseases will be discussed.

PART C: CASE PRESENTATION