

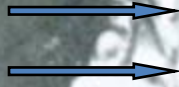
# Update from the Gnomes meeting 2011

Sinusoidal lesions

Alastair Burt  
Newcastle University



**Liver sinusoids**

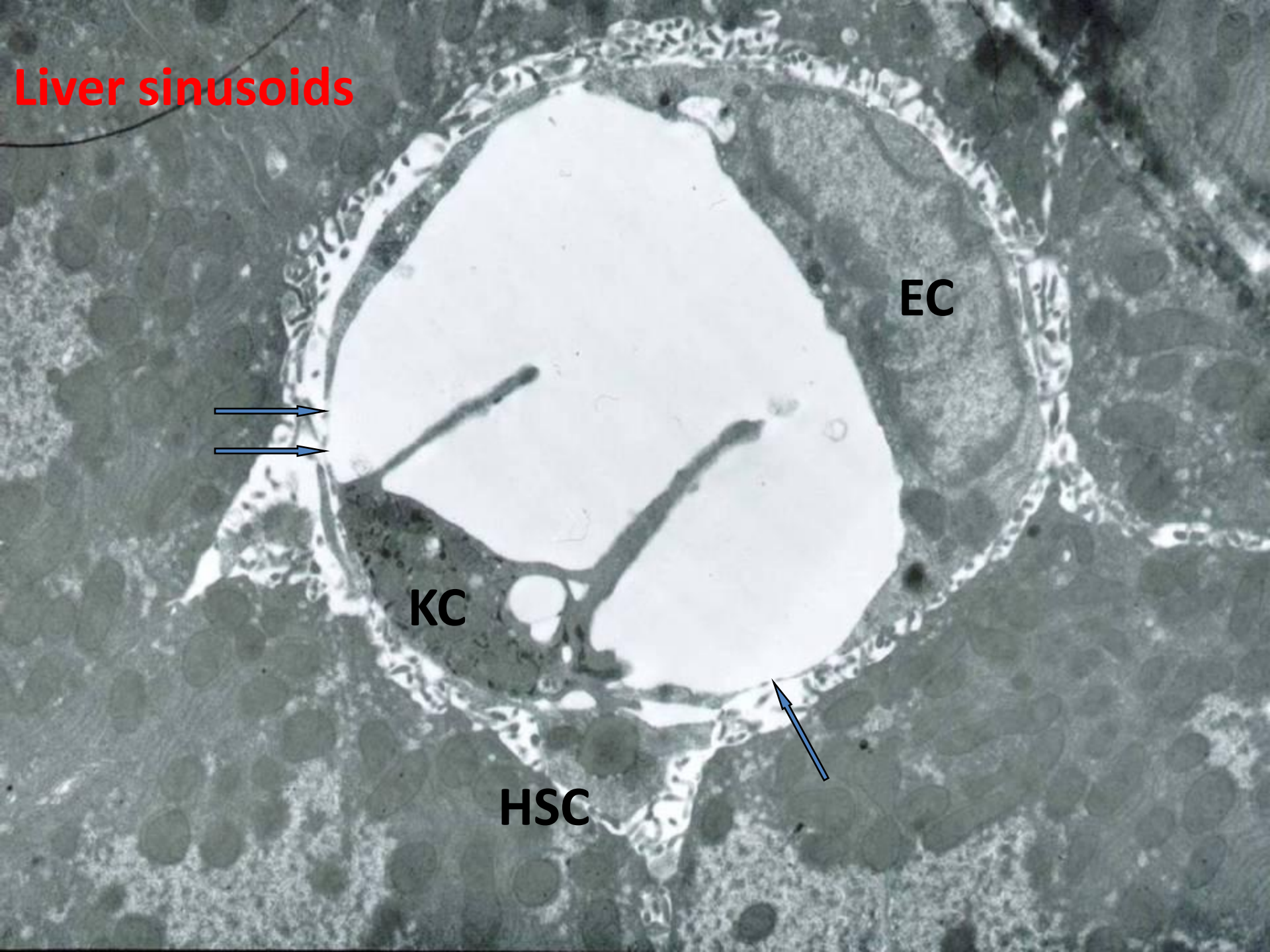


**EC**

**KC**



**HSC**



# Kupffer cells

- 'Fixed' tissue macrophages
- Recruitment from bone marrow-derived monocytes
- Clearance of viruses, fungi, bacteria and parasites
- Endotoxin clearance through TLRs
- Express endogenous peroxidase in RER in animal liver; human markers include CD68

# Sinusoidal endothelial cells

- Fenestrated with sieve like plates
- No underlying basement membrane (although some collagen IV present)
- Filtration effect: role of white blood cells
- Endocytosis and scavenger function
- Normal human liver: minimal expression of Factor VIII RAg/CD31/CD34

# Hepatic stellate cells

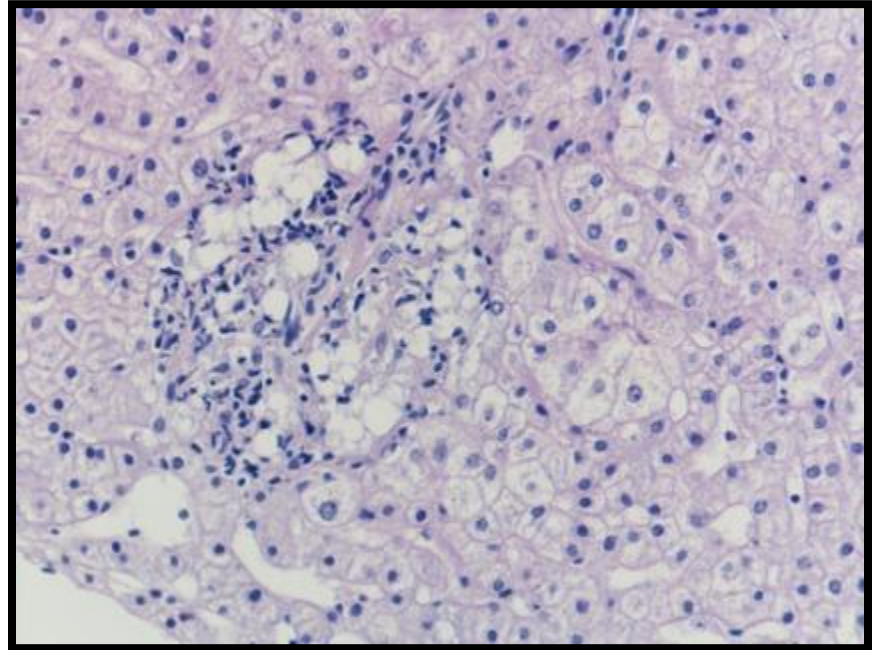
- Present in space of Disse
- Sinusoidal pericytes with long processes that surround SECs
- Contractile
- Produce matrix proteins and some metalloproteinases
- Storage of retinoids
- Activated to myofibroblasts:  $\alpha$  SMA positive

# Other sinusoidal components

- Second layer cells
- Liver associated lymphocytes
- Nerves
- Matrix proteins
- Lymph

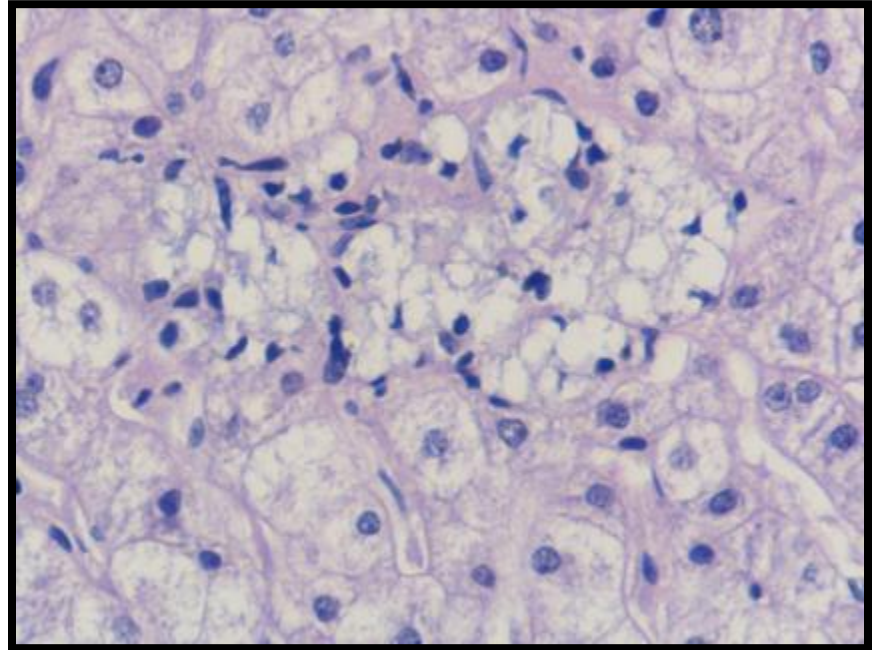
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- 37 year old female
- Recurrent febrile episodes
- Lower limb subcutaneous nodules
- Symmetrical sensory neuropathy
- Arthralgia
- Diagnosis: Weber-Christian disease: treated with steroids
- Developed plaques on legs and ulcers on elbows; knees
- Abnormal LFTs



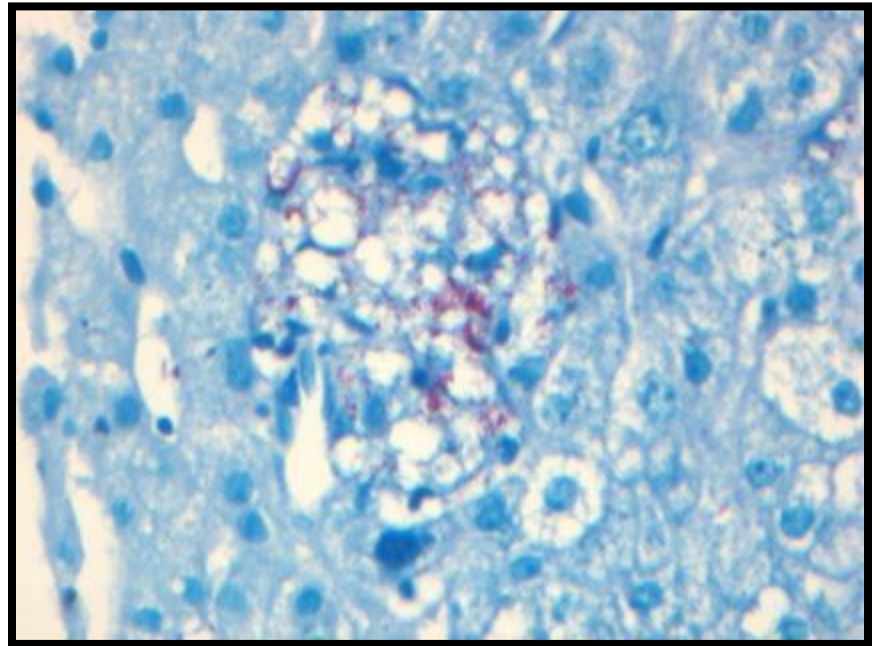
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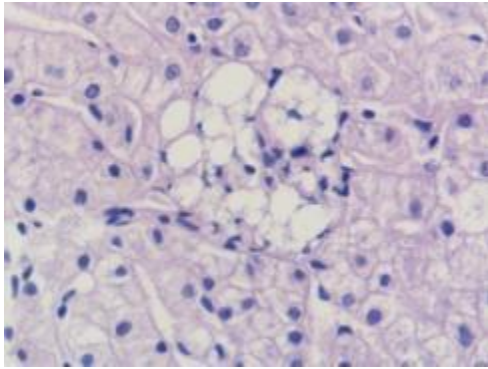


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# Foamy macrophages in lepromatous leprosy

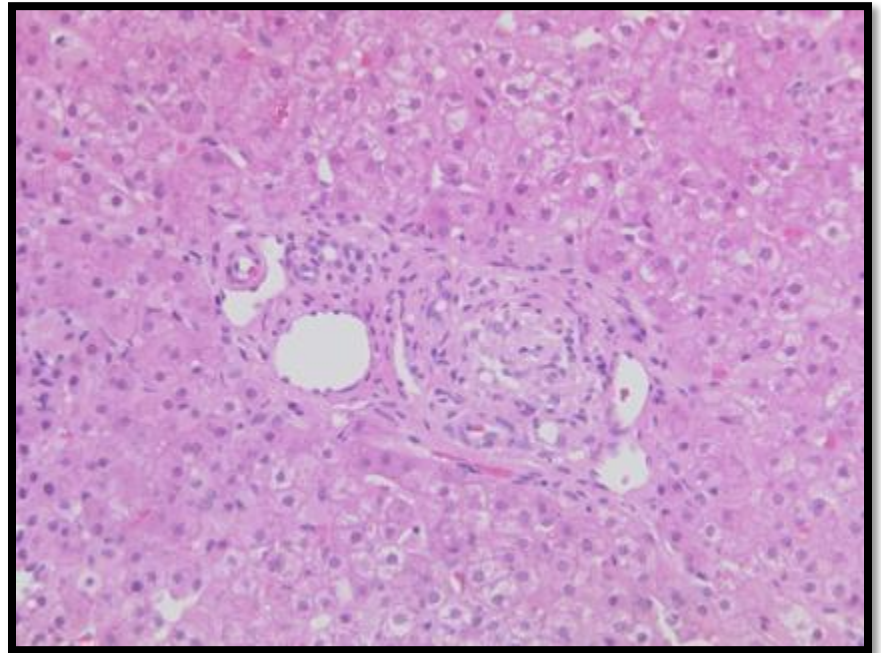


“In the fresh state they have one characteristic that is especially noteworthy, i.e., their tendency to form a sort of vacuole, apparently from taking up water, so that under the circumstances they acquire a wholly physaliferous appearance”

Virchow, R. (1863). Die krankhaften Geschwülste. August Hirschwald, Berlin.

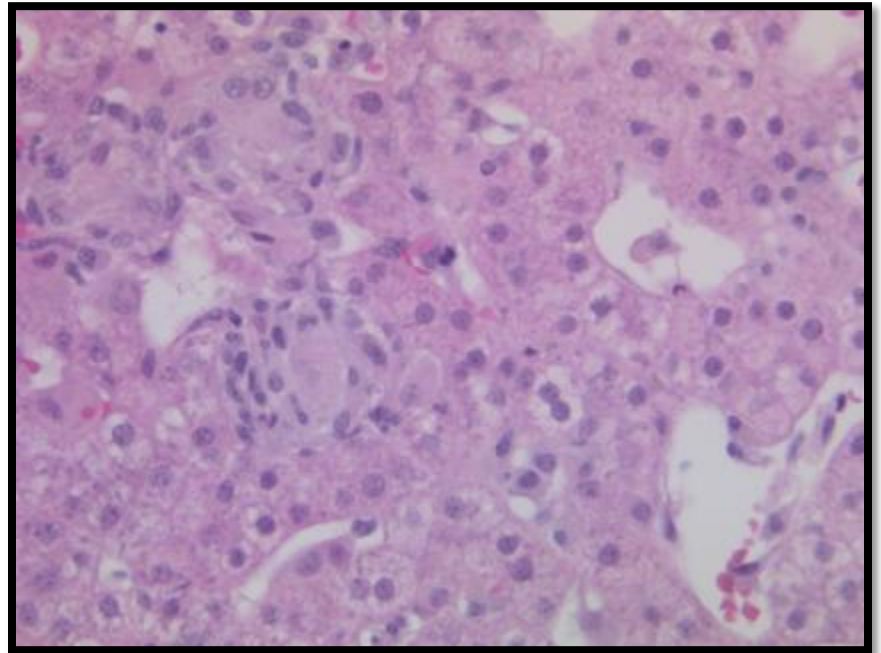
# Case study: Newcastle A

- 9 month old female
- Referred to Tertiary Immunodeficiency Unit with Severe Combined Immune Deficiency
- BMT performed with successful engraftment
- Post transplant noted to have abnormal LFTs with ALT > 1000
- All viral screening negative apart from HHV6



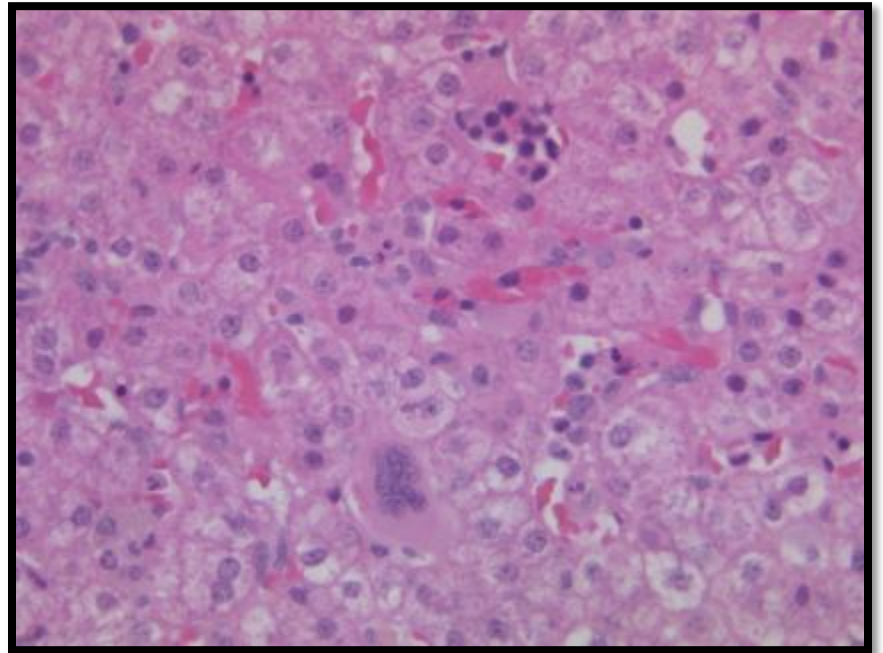
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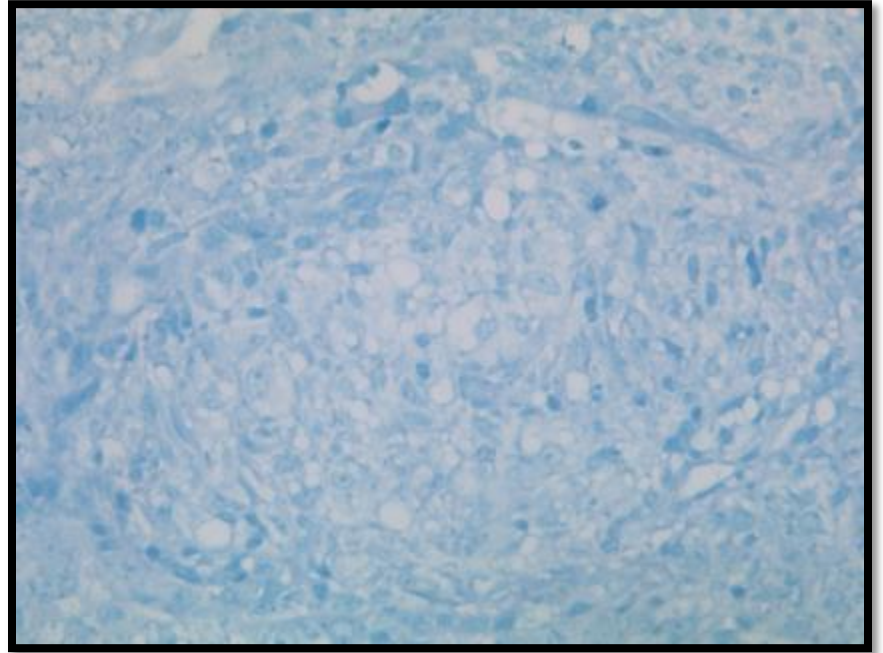
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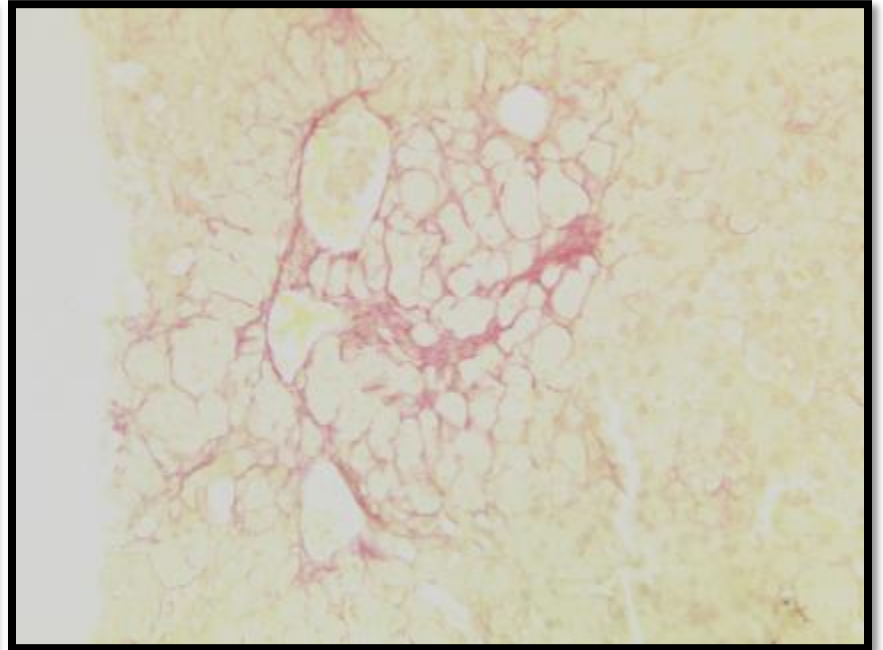
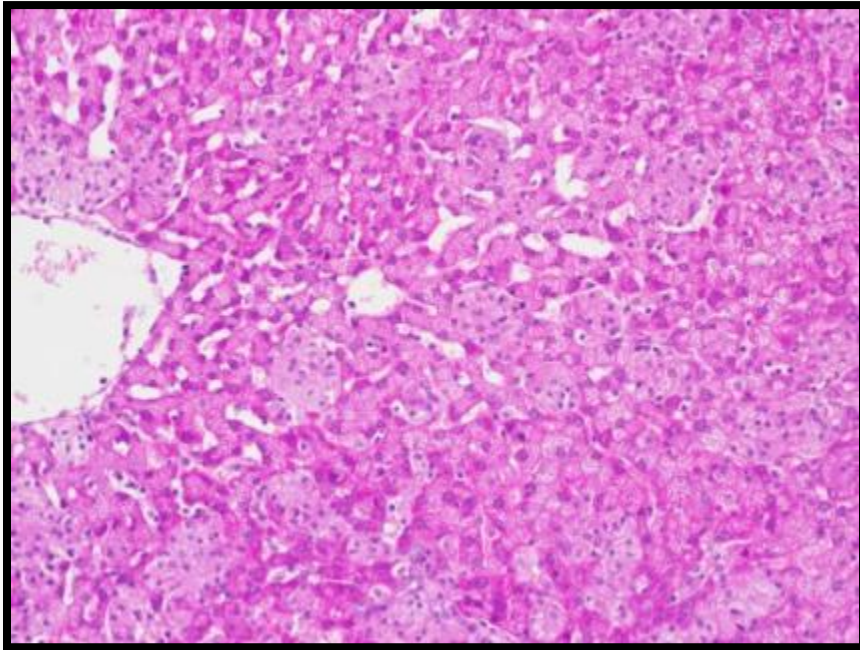


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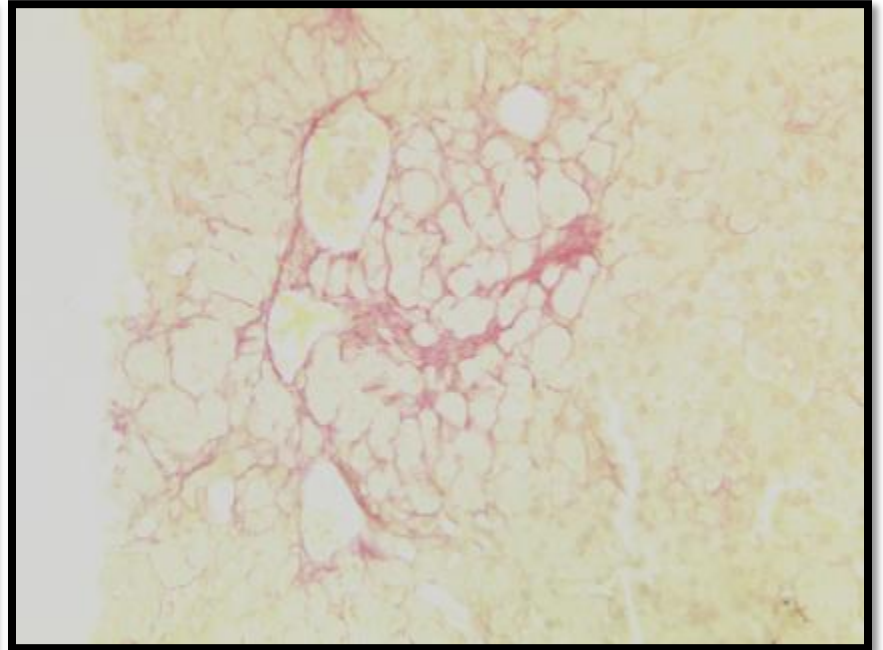
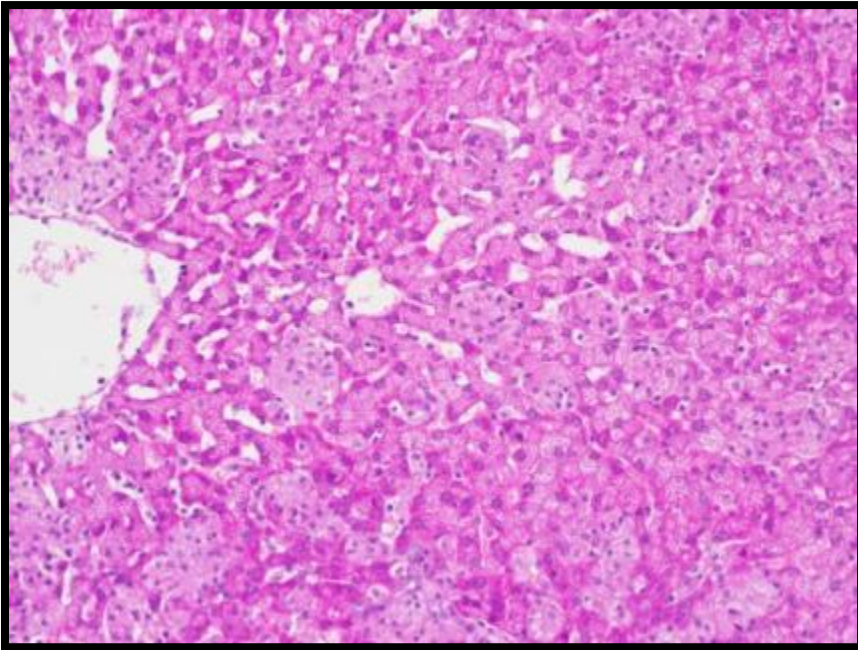
- Aged 5 months presented with skin ulcers: BCG abscesses
- Treated with anti-tuberculous therapy
- SCID: mutation not known: NK indeterminate
- Allograft from father: CD3/CD10 depleted
- Episodes of fever post BMT: immune reconstitution? HHV6?
- Liver injury: ? All BCG or superimposed HHV6 and/or immune reconstitution



# Newcastle A: differential diagnosis



# Newcastle A: differential diagnosis



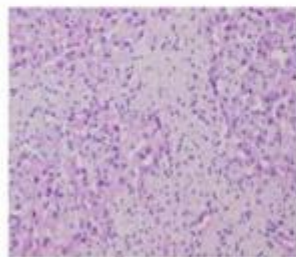
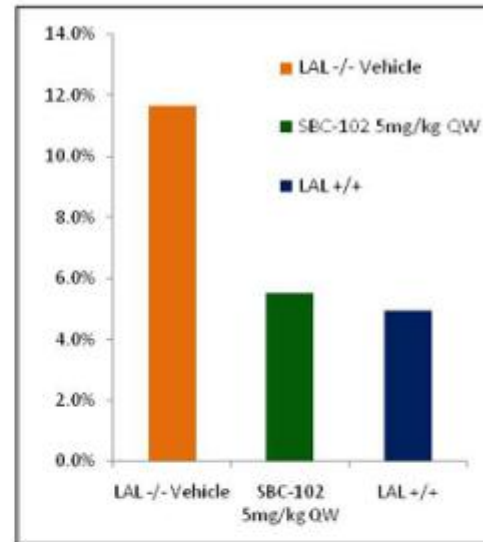
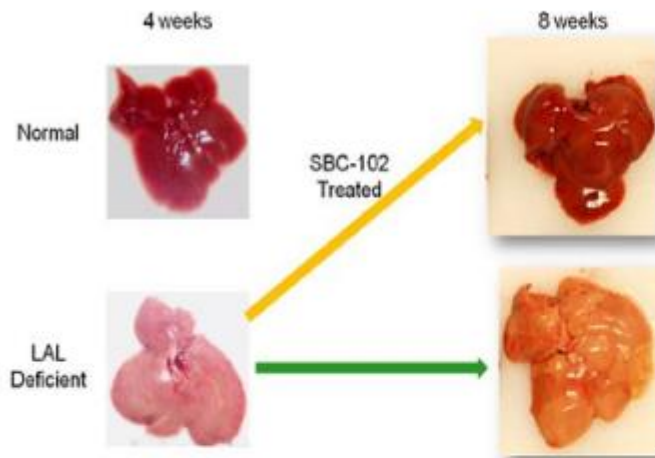
**RECOMBINANT LYSOSOMAL ACID LIPASE NORMALIZES LIVER WEIGHT, TRANSAMINASES AND HISTOPATHOLOGICAL ABNORMALITIES IN AN *IN VIVO* MODEL OF CHOLESTERYL ESTER STORAGE DISEASE**

M Leavitt<sup>1</sup>, AD Burt<sup>2</sup>, W Hu<sup>1</sup>, D Canty<sup>1</sup>, M Gray<sup>1</sup>, A Bray<sup>1</sup>, A Harvey<sup>1</sup>, CP Day<sup>3</sup>, AG Quinn<sup>1</sup>

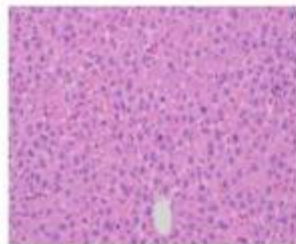
<sup>1</sup> Synageva BioPharma Corp., Lexington, MA; <sup>2</sup> Institute of Cellular Medicine & <sup>3</sup> Faculty of Medical Sciences Newcastle University, Newcastle upon Tyne, UK

# Pharmacodynamic effects of SBC-102

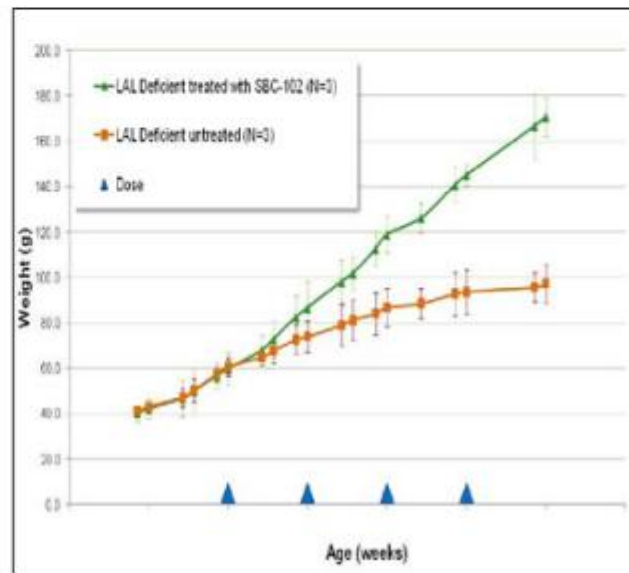
SBC-102 5mg/kg once weekly (4 doses)



LAL Deficient



SBC-102 Treated



# Kupffer cell aggregates and accumulation

## Foamy

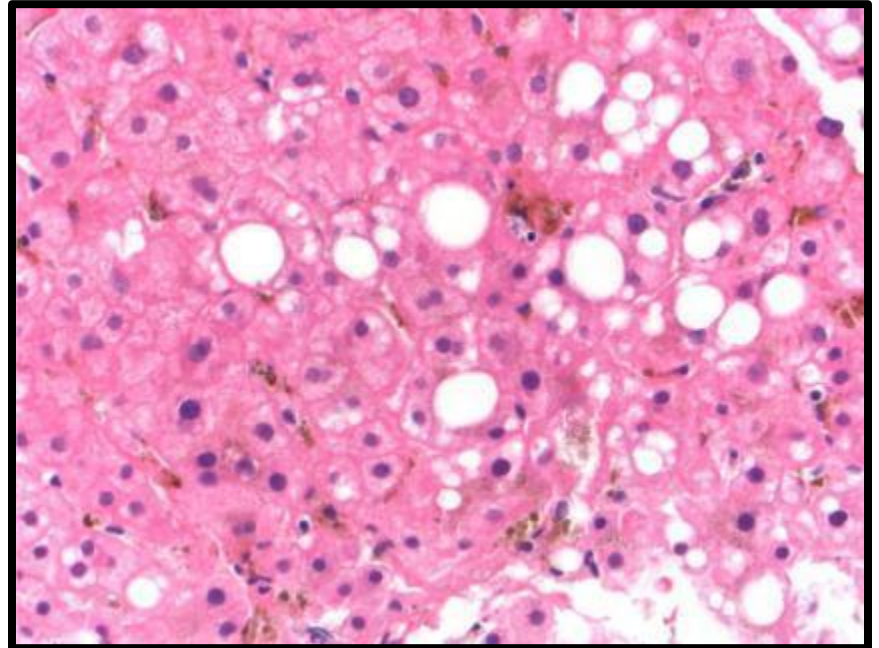
- CESD
- Cystinosis
- GM1 gangliosidosis type III
- Fabry disease
- Metachromatic leukodystrophy
- Niemann-Pick disease
- Atypical mycobacterial diseases

## Non-foamy

- Ceroid-pigment
- Ceroid lipofuscinosis
- Other pigments (malaria, schistosomiasis, thorotrast, gold, iron)
- Gaucher disease
- Non-Langerhans cell histiocytosis
- Whipple disease

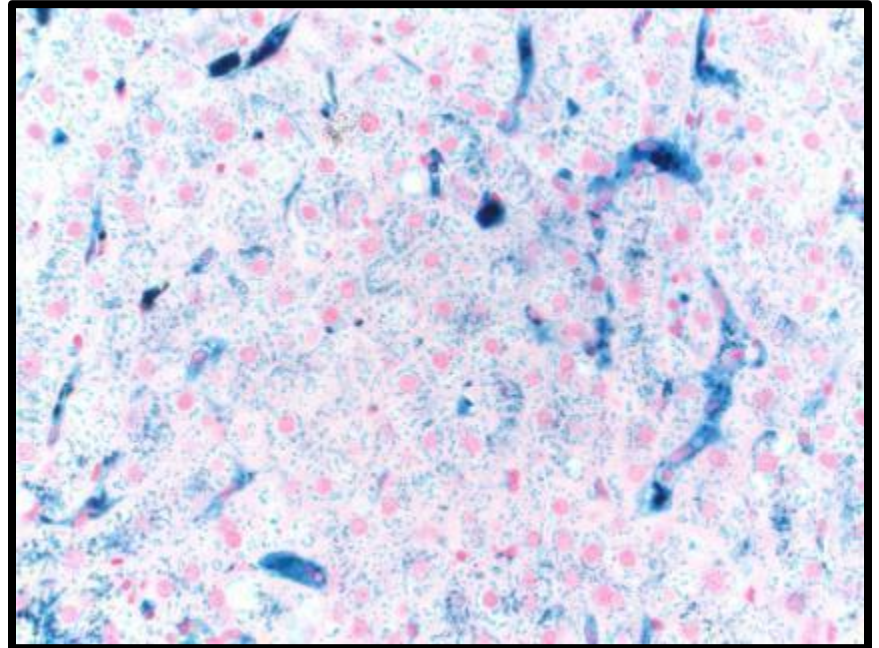
# Case study: Brisbane A

- 36 year old female
- Normal BMI
- Physical exam normal
- Raised serum ferritin (3340 ug/L)
- Transferrin saturation normal (29%)
- HFE: no mutations (C282Y, H63D, S65S)
- Iron
  - HIC 96 umol/g (NR 5-35)
  - HII 2.1 (N < 1.1)
- No thalassaemia, anaemia, PCT, CLD



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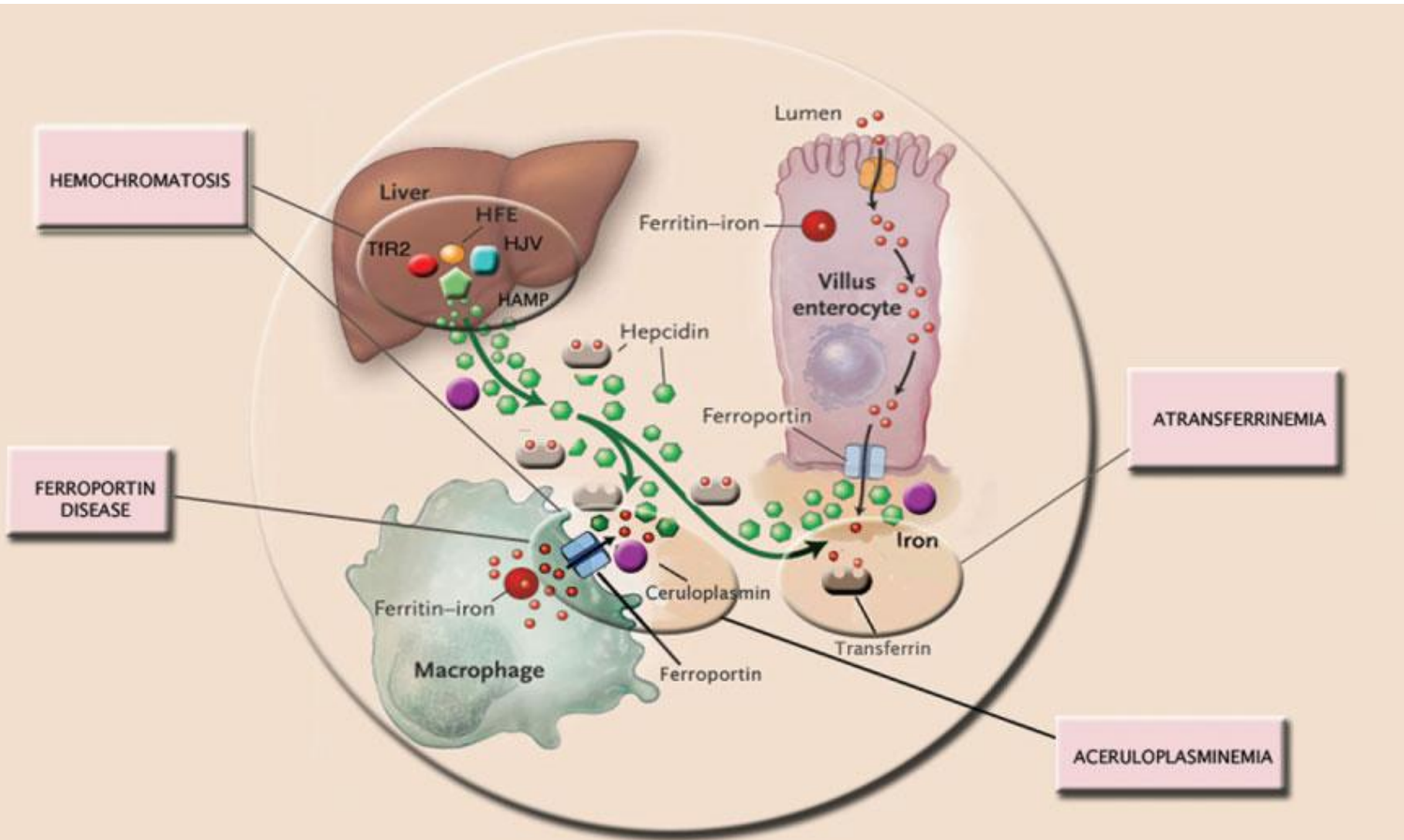
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- No thalassaemia, anaemia, PCT, CLD
- Ferroportin gene (*SLC40A1*) coding region & splice sites sequenced
- Alanine to aspartic acid substitution
  - A77D
  - inactivating

# Ferroportin



# Ferroportin disease

## Classical

Inactivating  
Macrophage accumulation

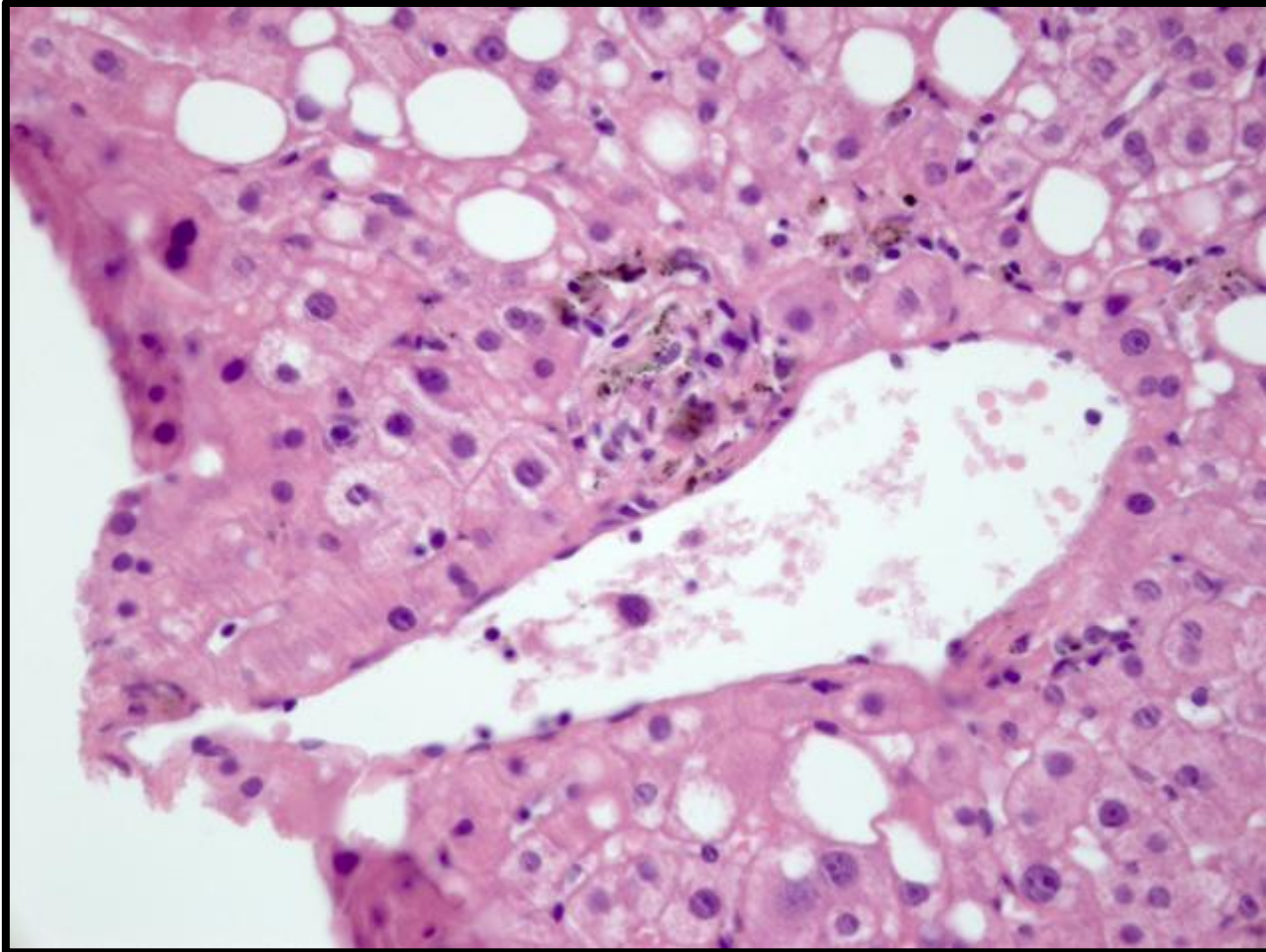
- A77D
- D157G
- V162del
- others

## Non-classical

Activating  
Distribution like genetic  
haemochromatosis

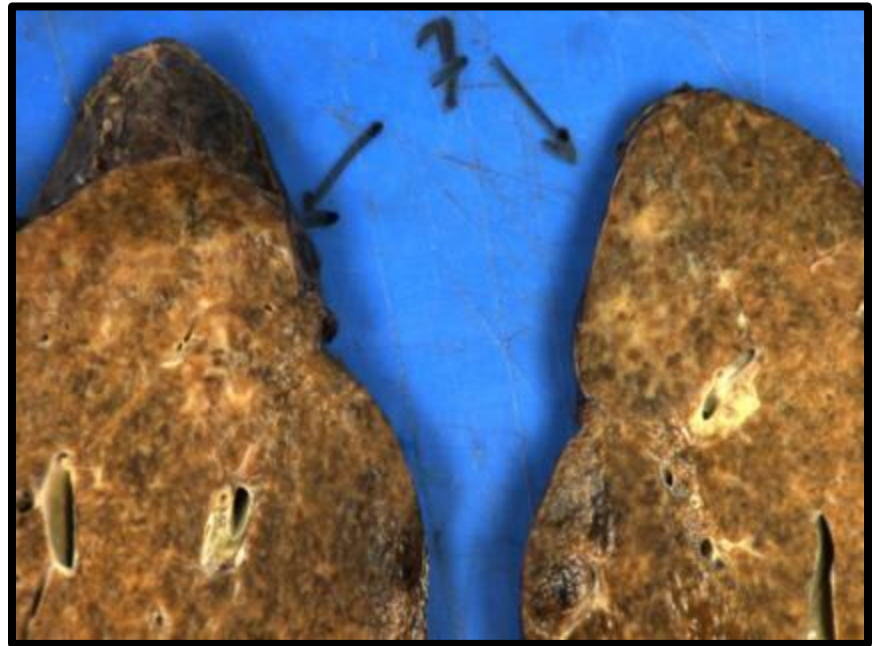
- N144H
- Y64N
- C326Y/S
- others

# Cologne B



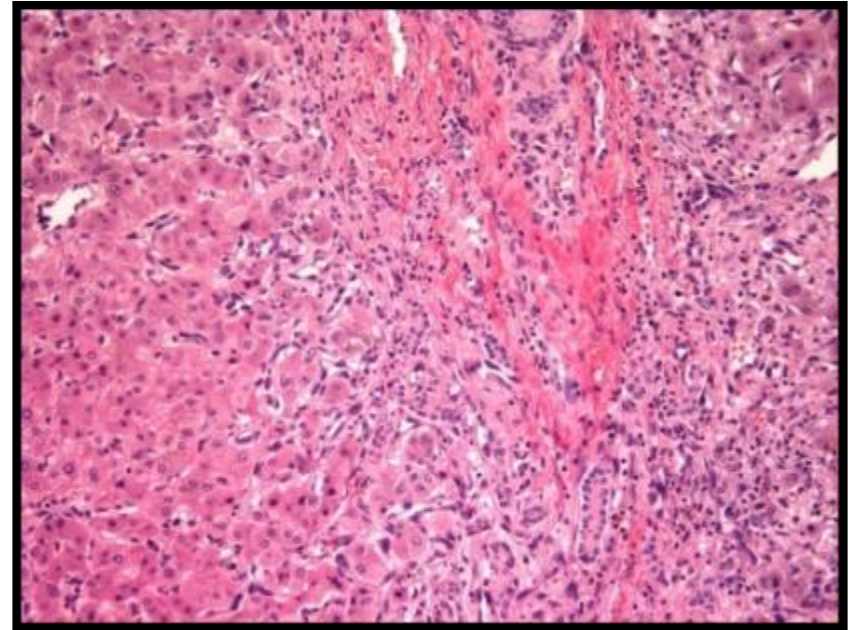
# Case study: Groningen A

- Male 30yrs
- 2007: diagnosis of cirrhosis elsewhere
  - Oesophageal varices
  - splenomegaly
  - Years of alcohol and cocaine abuse
- 2008: admission for OLT
  - jaundice, portal gastropathy, obesity (BMI 37), DM II, HIV/HBV/HCV neg
  - AP 200, LDH 392, ALT 68, Bil 550, albumin 24, GGT 22
  - CT: non-homogenous liver but no focal lesion



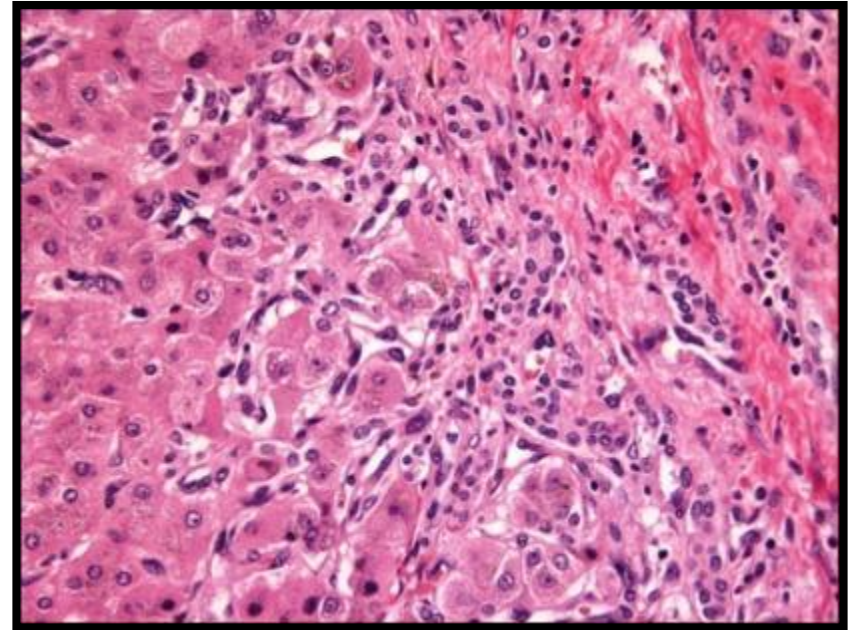
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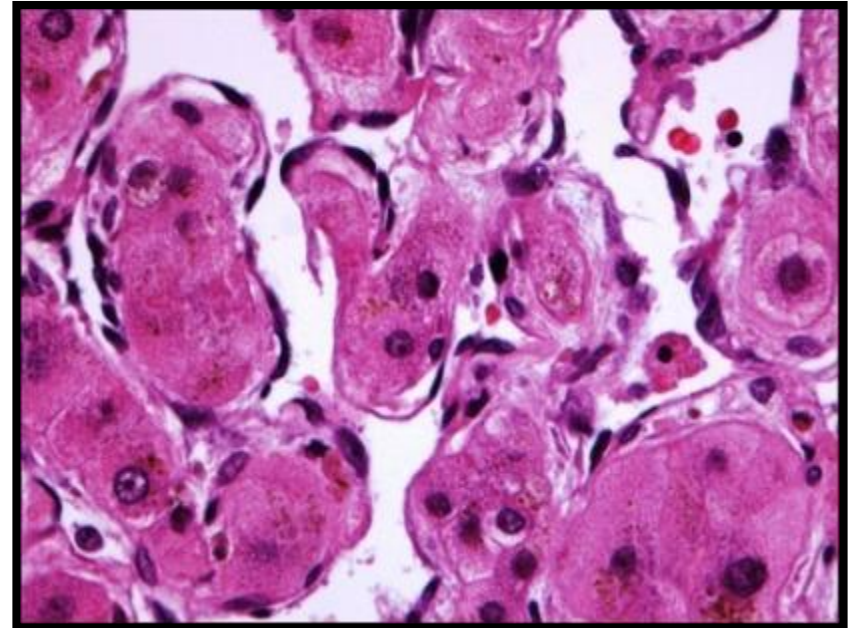
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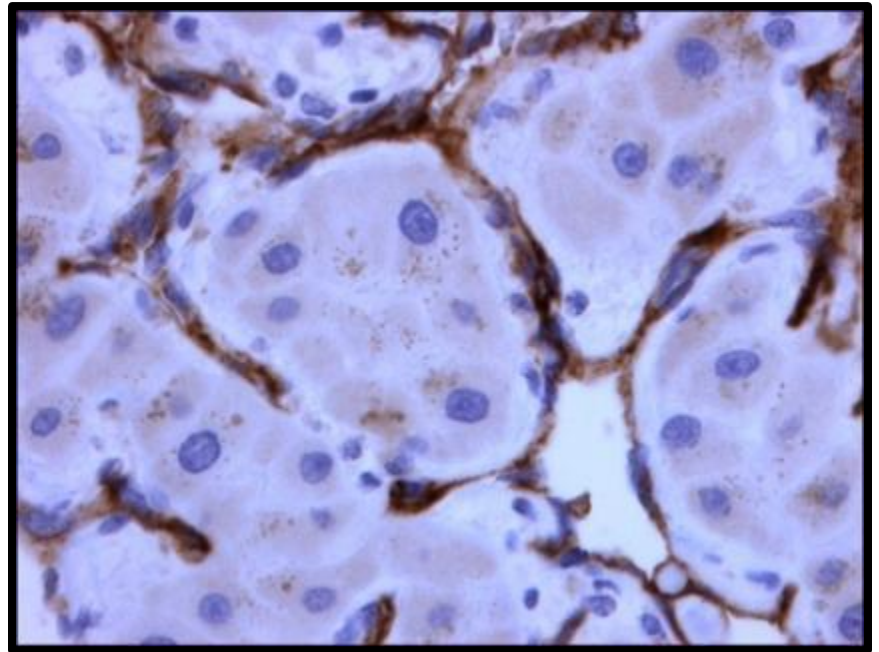
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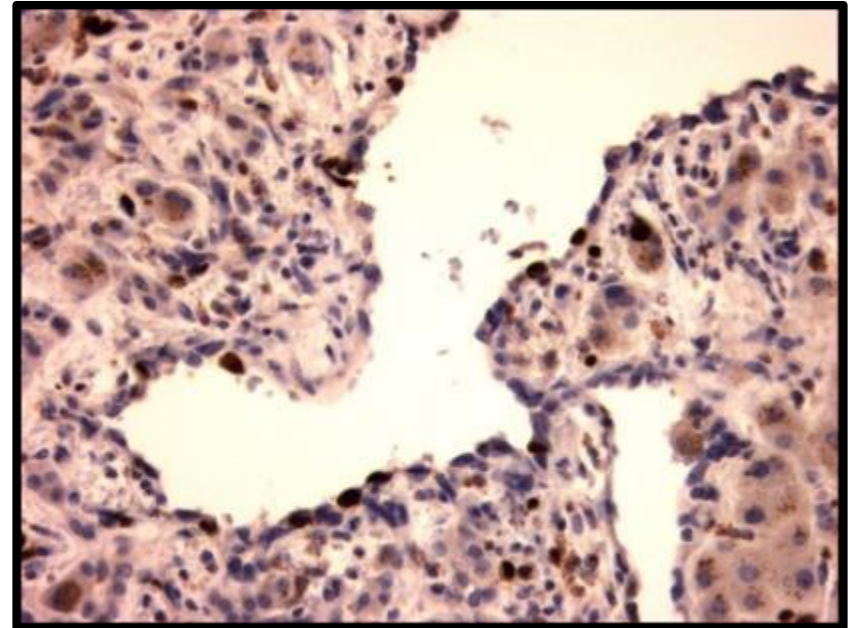
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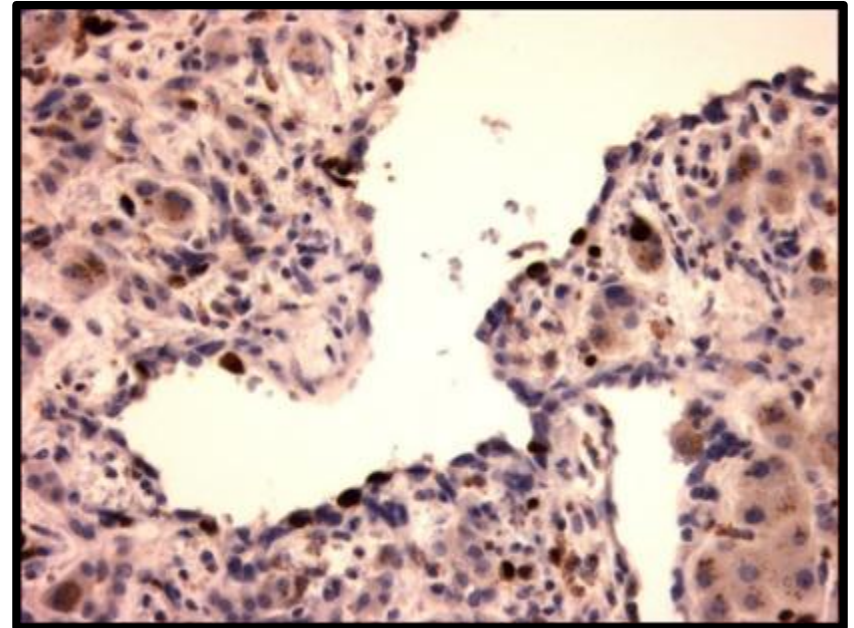
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# Groningen A: angiosarcoma

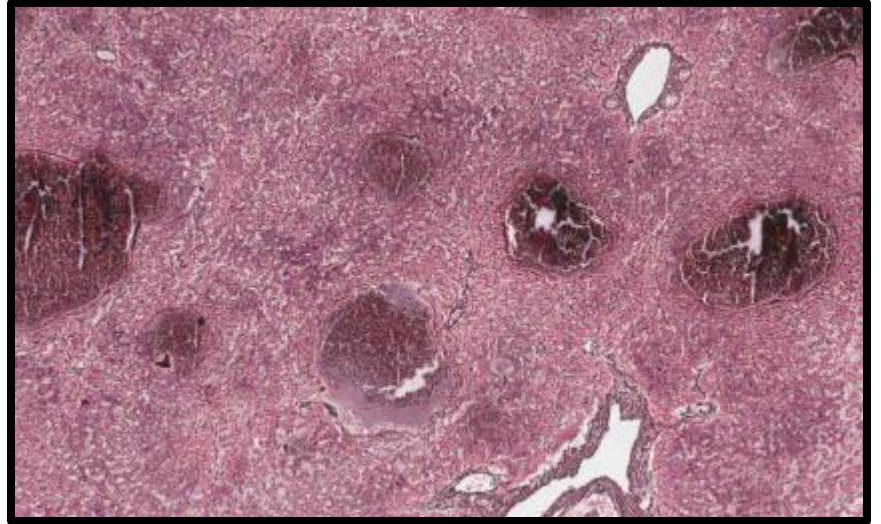
- Rare; < 1% primary malignant liver tumors
- About 25 cases/yr USA
- M:F = 3:1; Age: 50-60 yr
- Aetiology:
  - Carcinogenic agents: thorotrast, pvc, arsenic, anabolic steroids, cyclophosphamide
- Symptoms: abdominal pain, weight loss, weakness



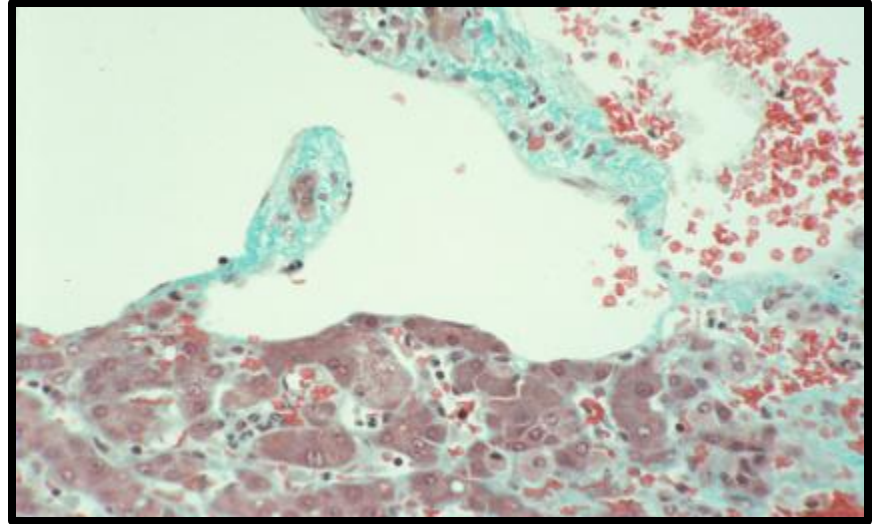
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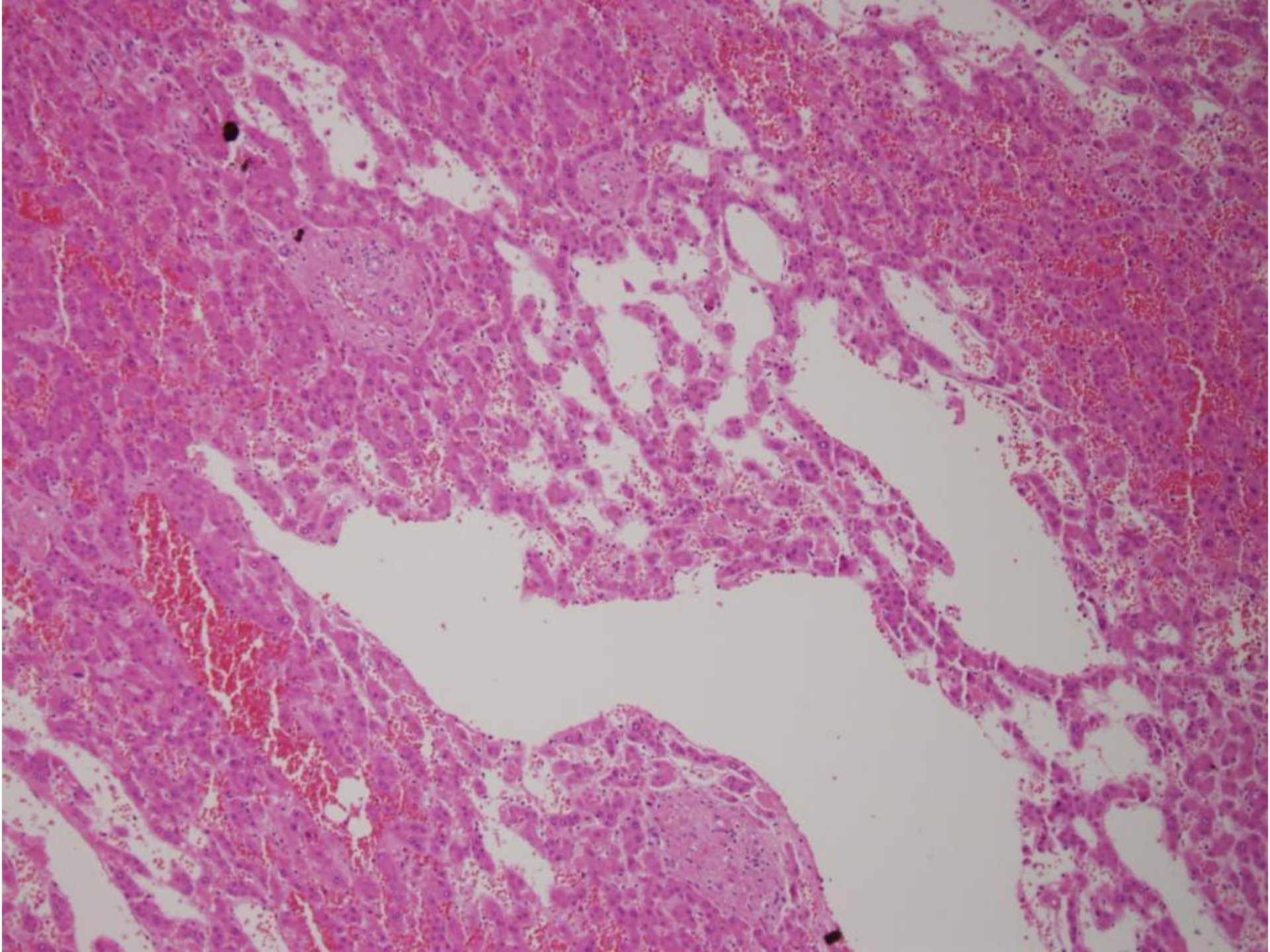
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- Symptoms: abdominal pain, weight loss, weakness
- 4 days post OLT: ReTx due to PNF
- Complicated post LT course: infections
- 4 months post OLT: lung and bone-marrow metastasis (BM biopsy proven)
- † 9 months post OLT

# Halifax A



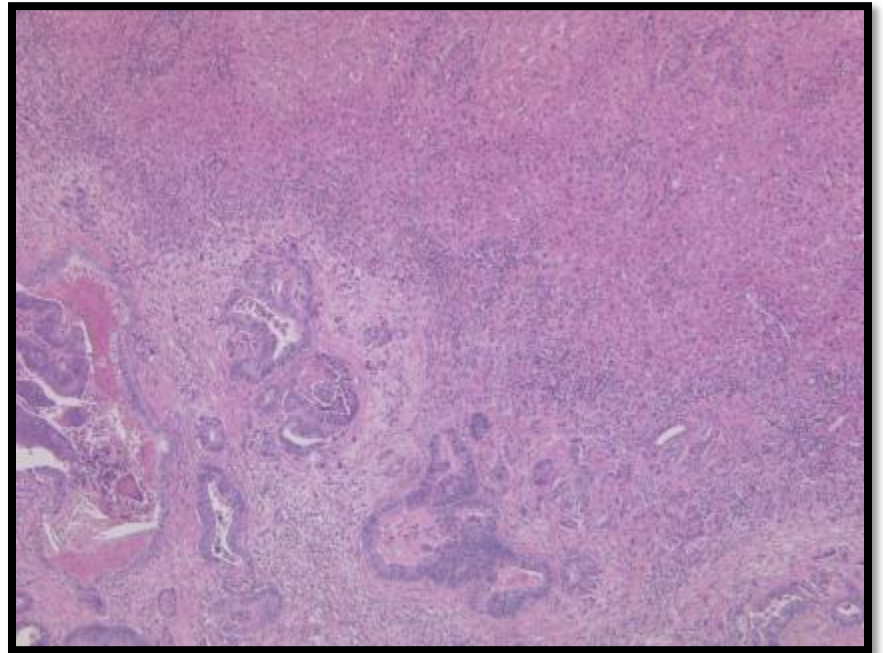
# Halifax A: peliosis hepatis





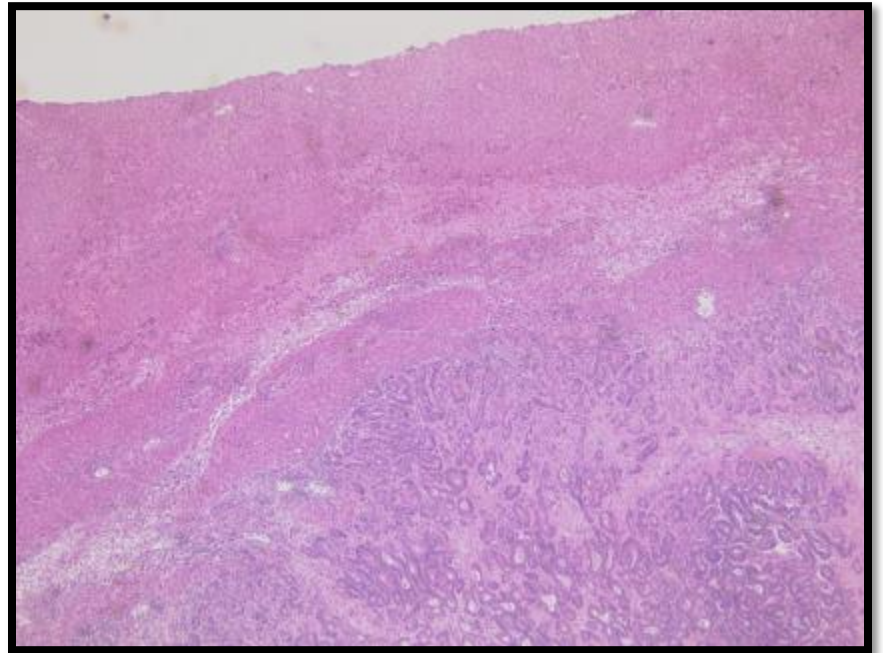
# Case study: Newcastle B

- 65 year old male
- T3N1 upper rectal carcinoma with liver metastases
- Pre-operative chemo-radiotherapy (including oxaliplatin)
- AP resection and right hemihepatectomy



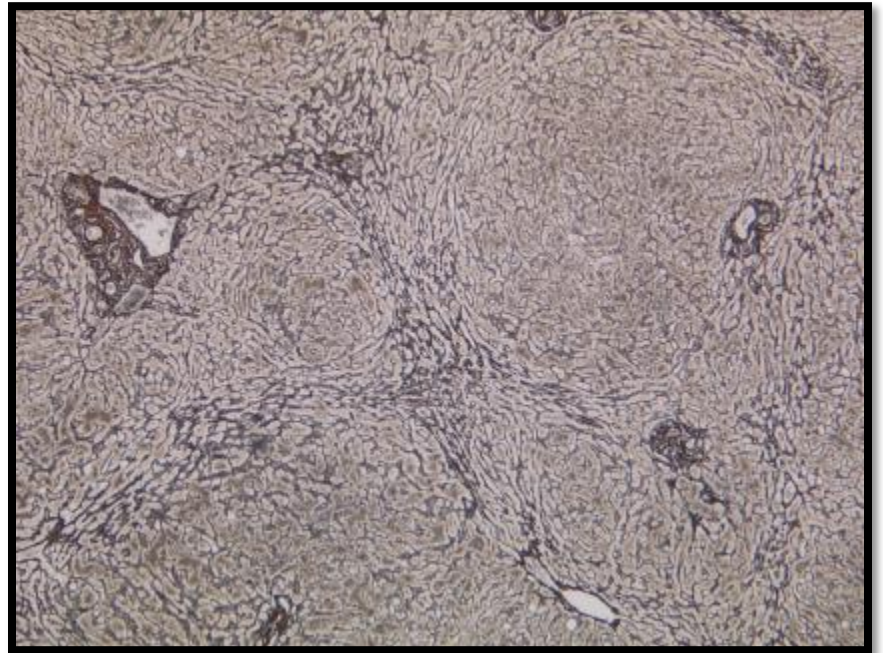
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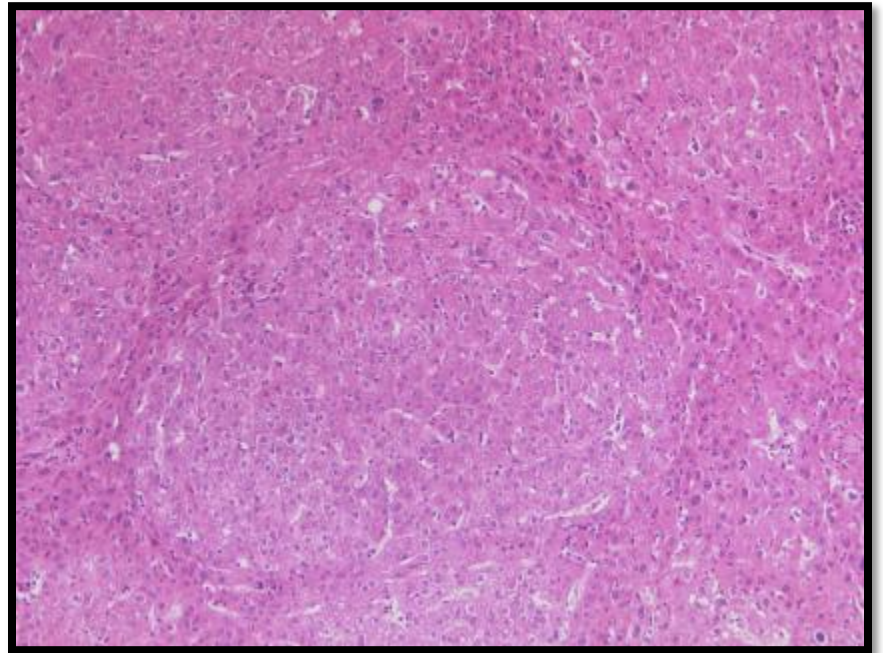
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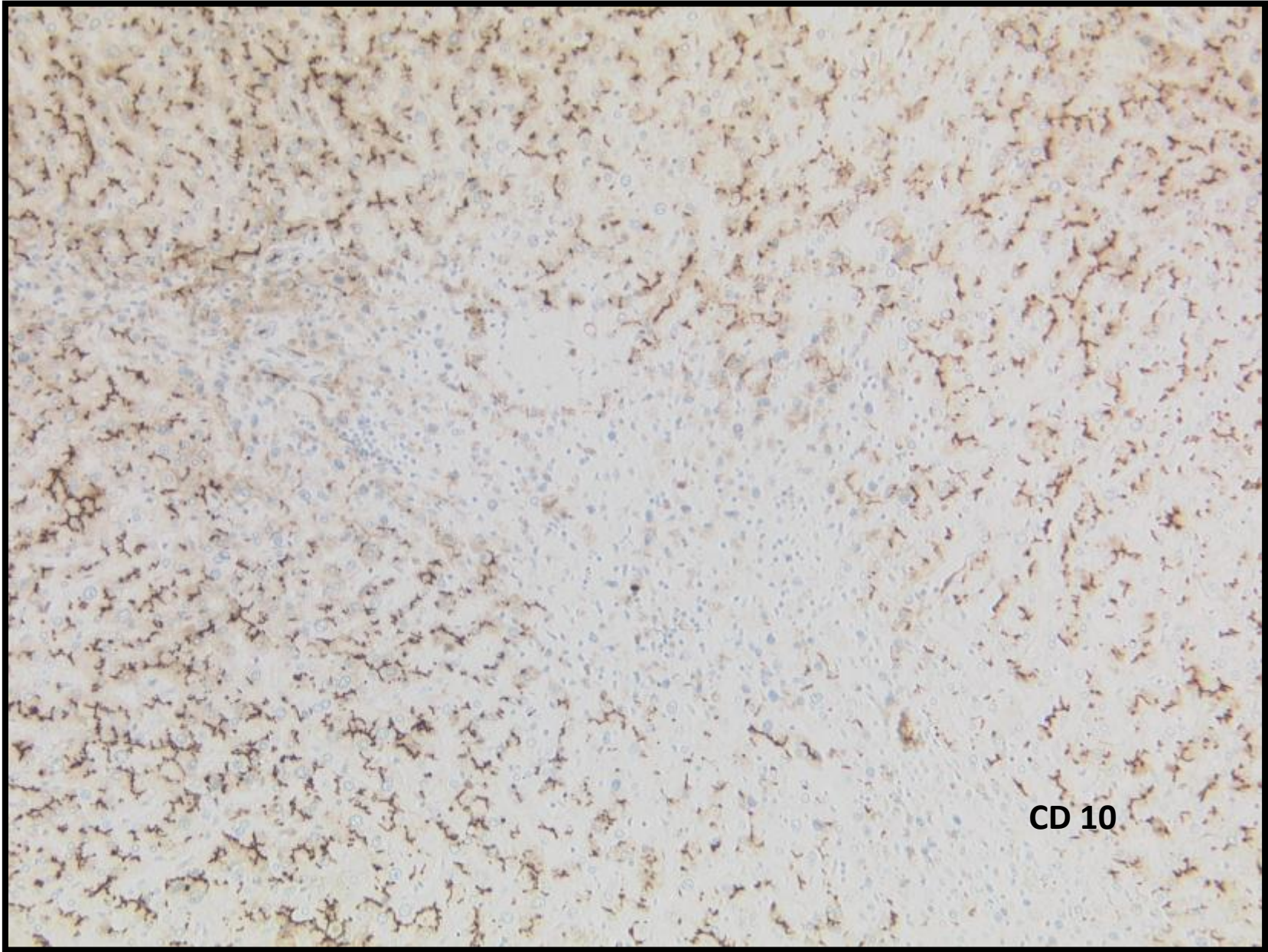
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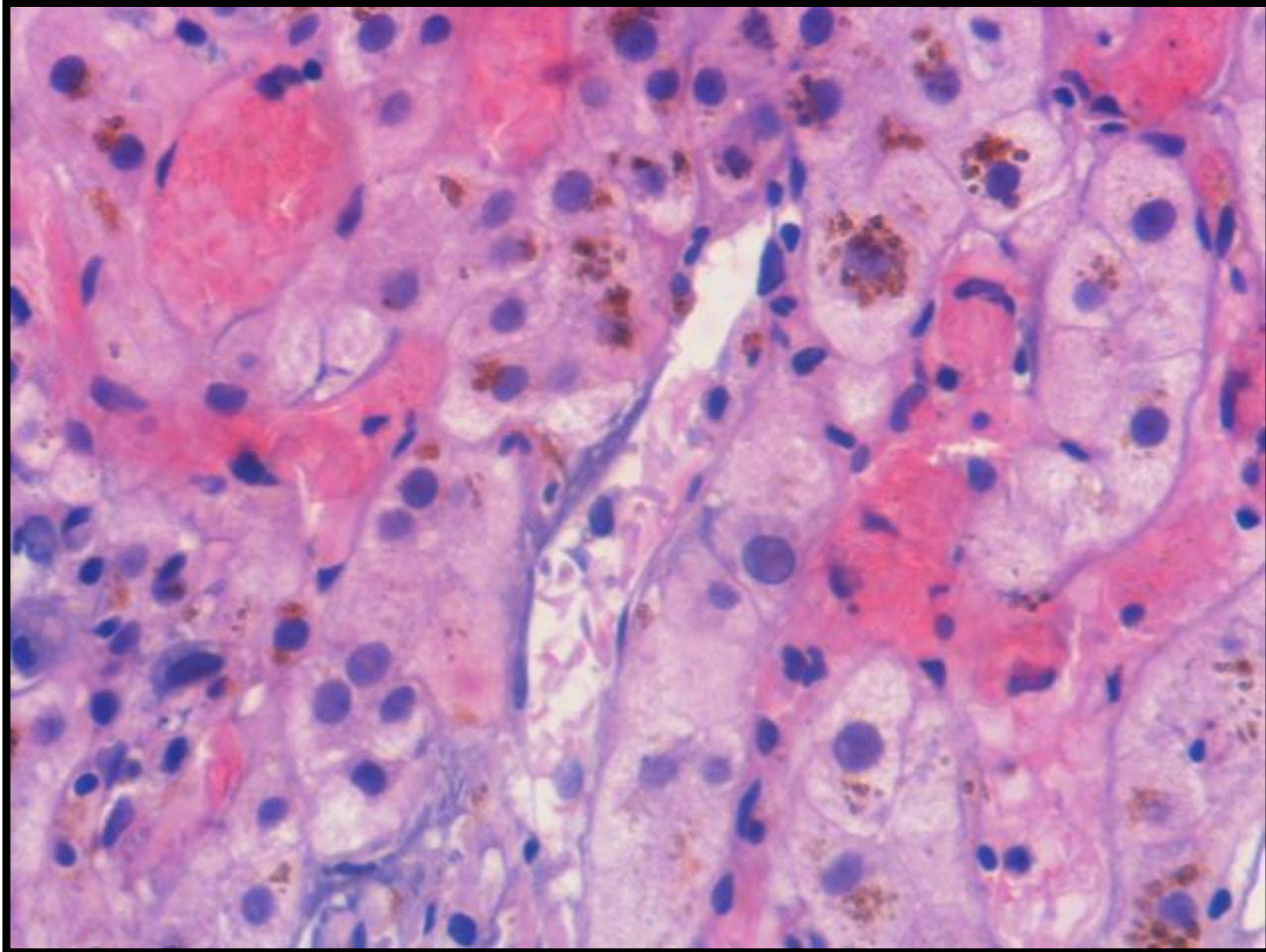
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**CD 10**

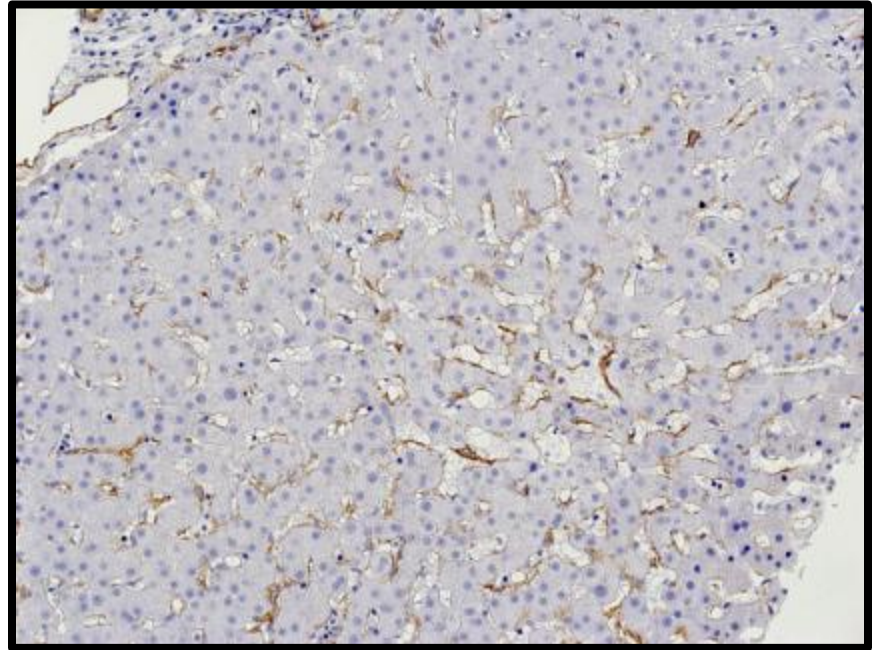
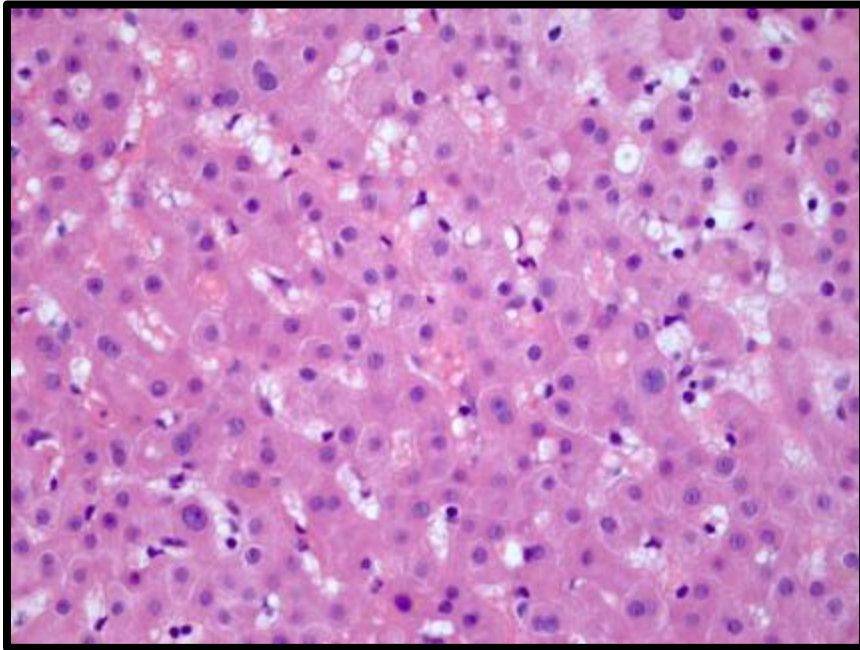
# Athens B



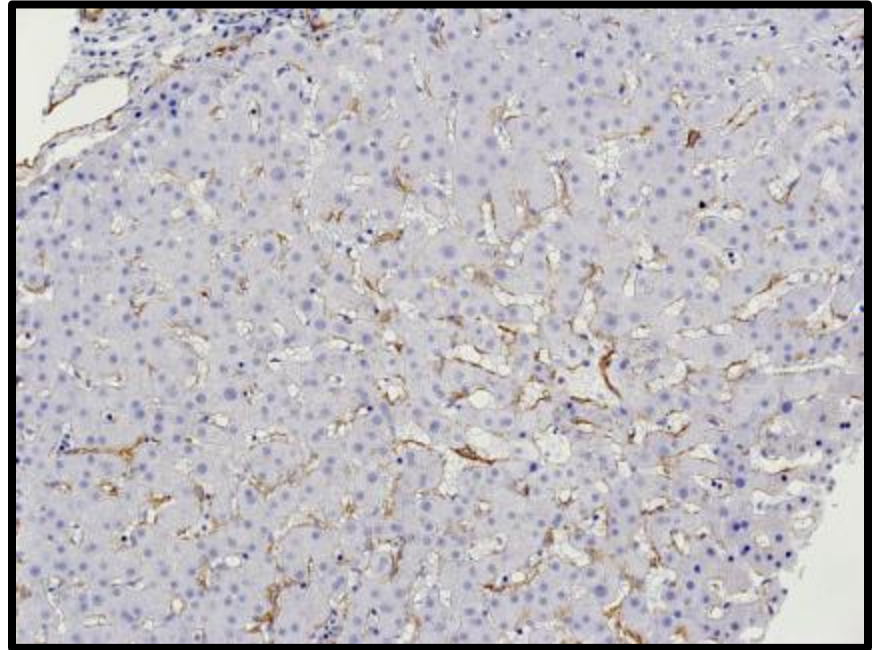
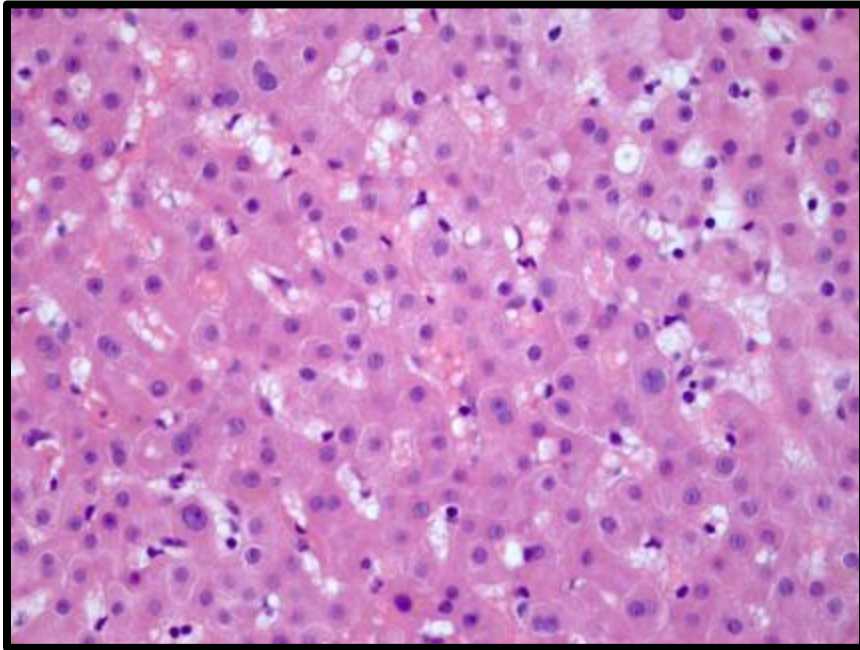
# Hepatic histological findings in SCD

- Severe fibrosis/cirrhosis (16%-29%)
  - associated with the presence of viral infection (20%-50% HCV or HBV)
  - markers of autoimmune disease
    - due to SCD alone
- Secondary iron overload
- Erythrophagocytosis
- Extramedullary haemopoiesis
- NRH
- Cholangiopathy
- Sickle cell intrahepatic cholestasis (very rare)

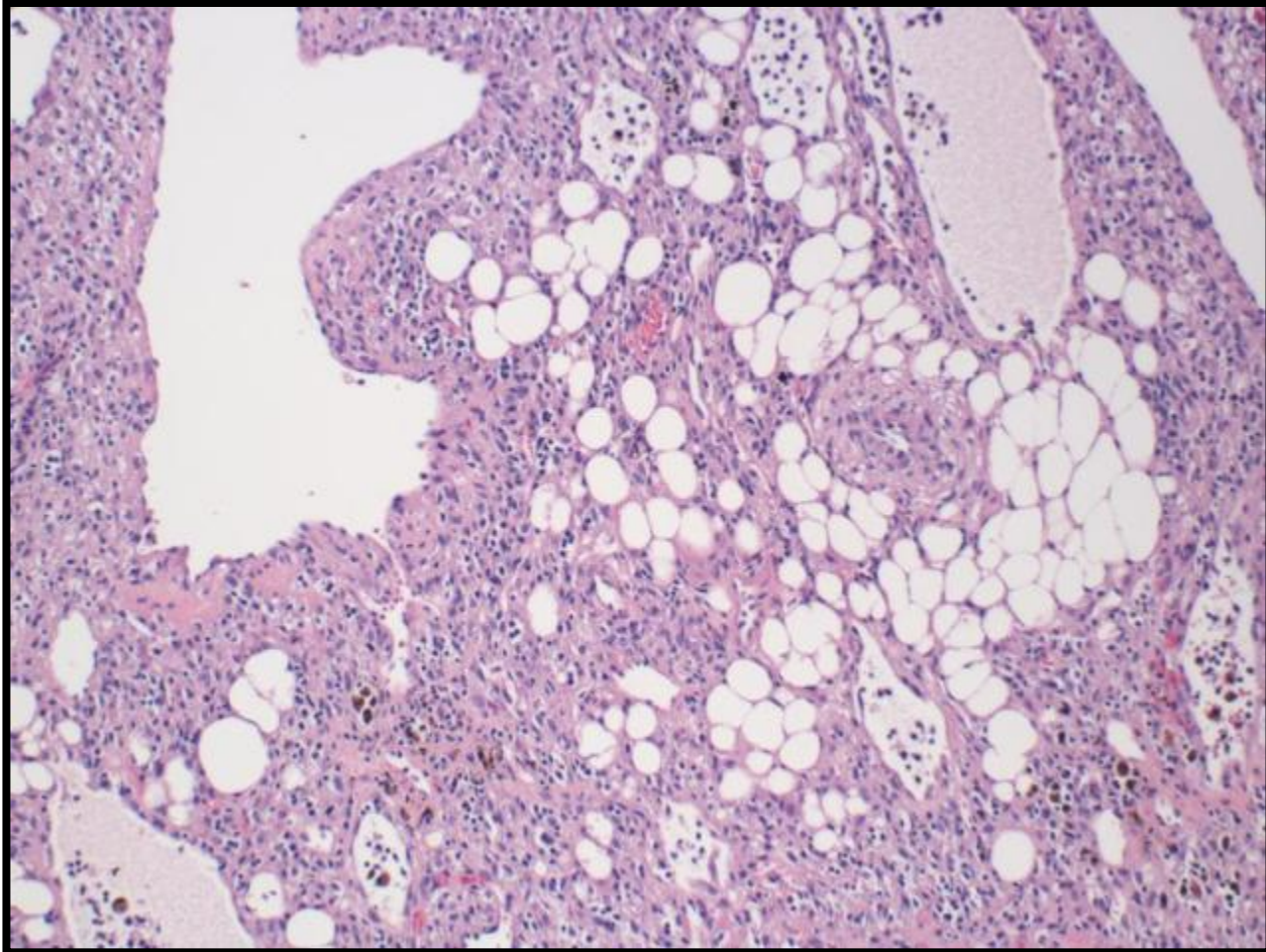
# Cologne C



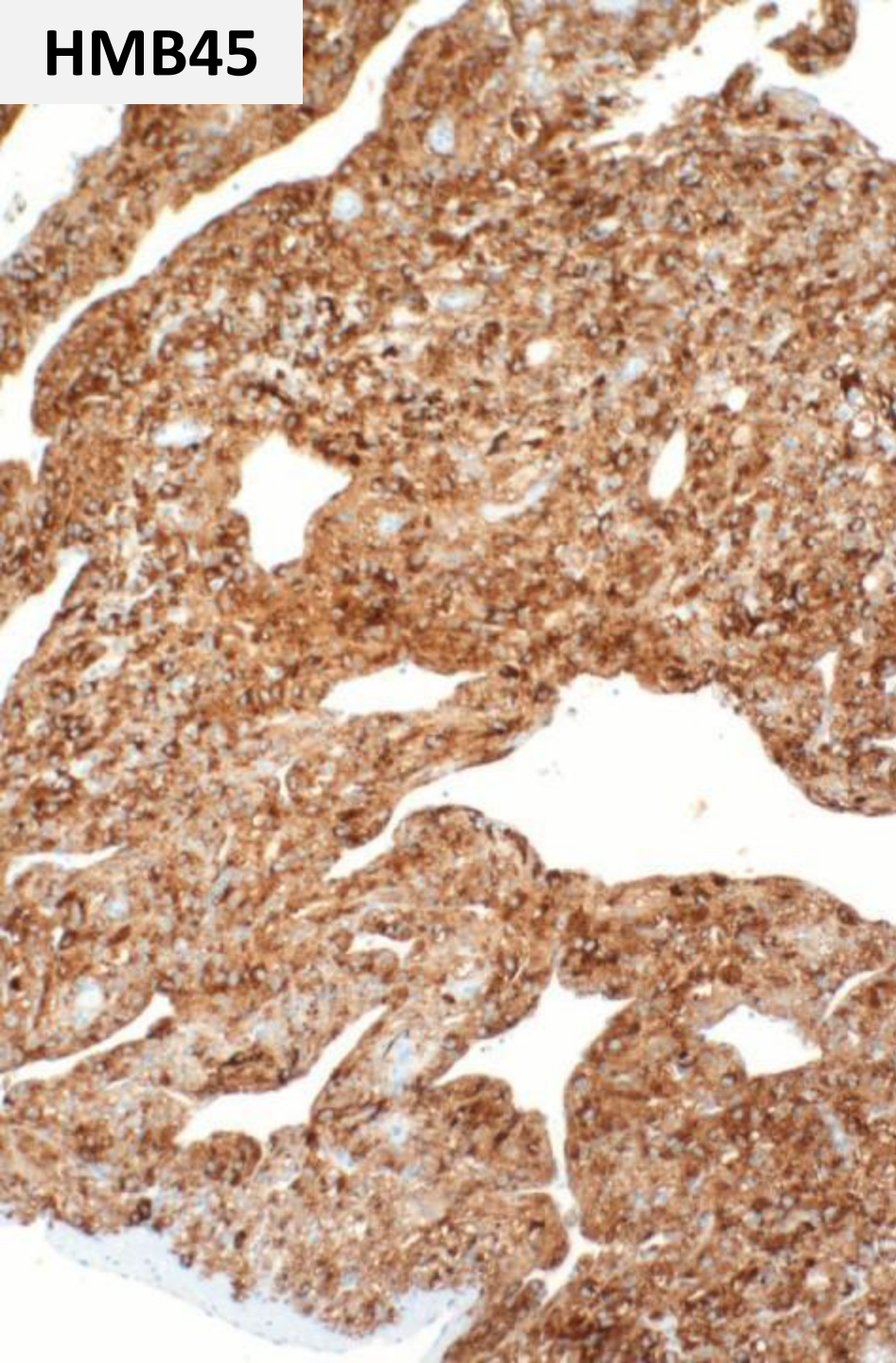
# Hypervitaminosis A



# Washington C

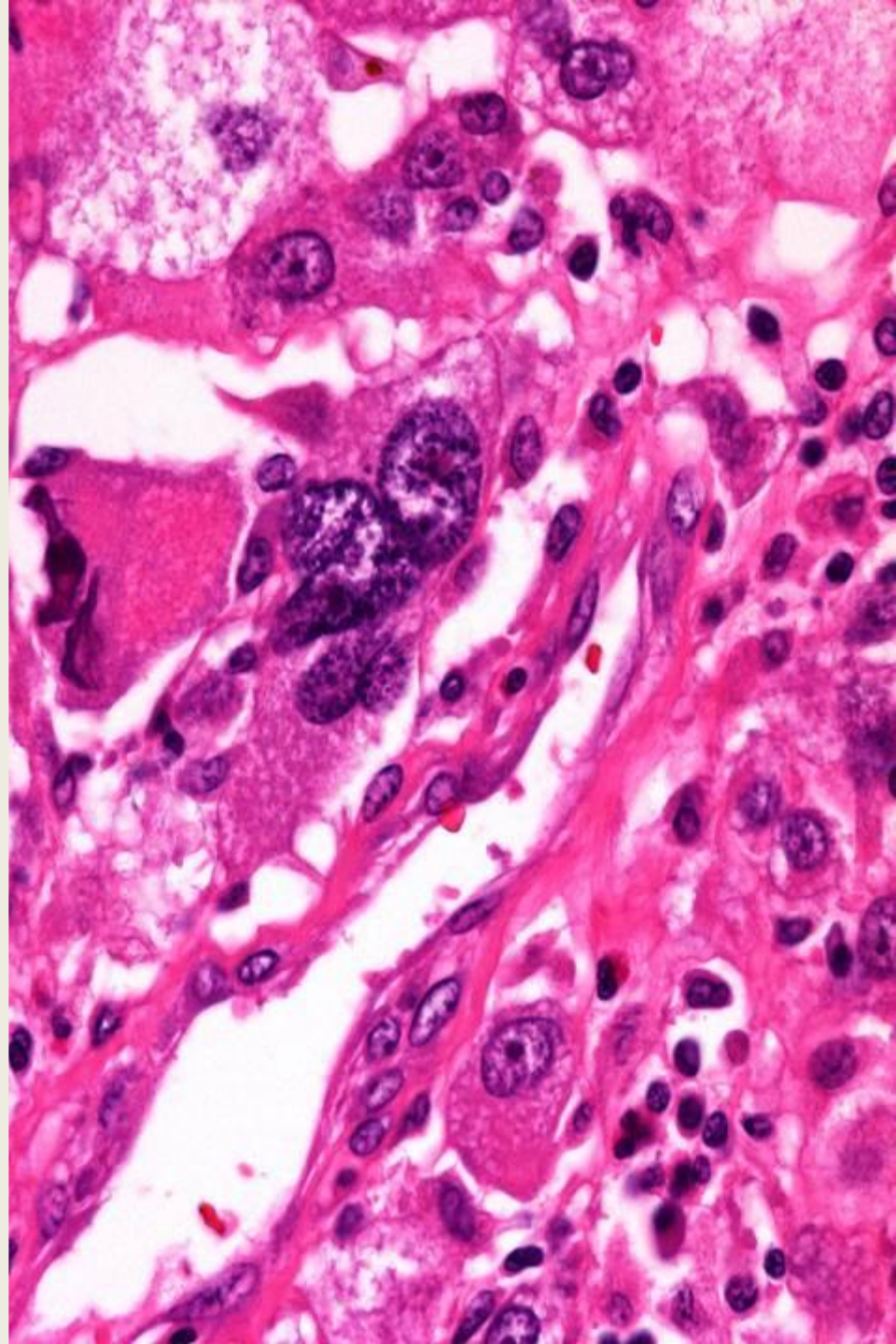
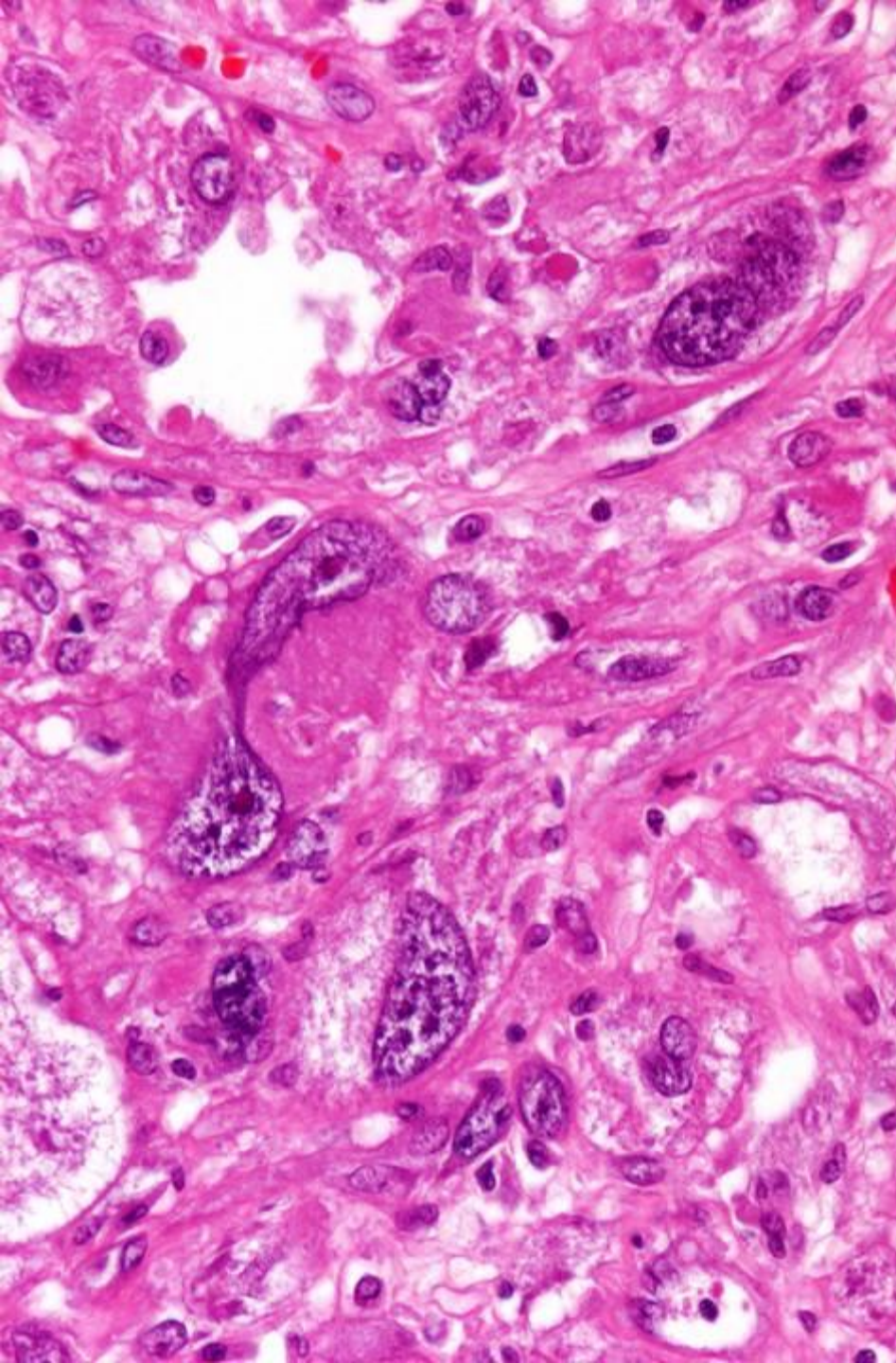


**HMB45**

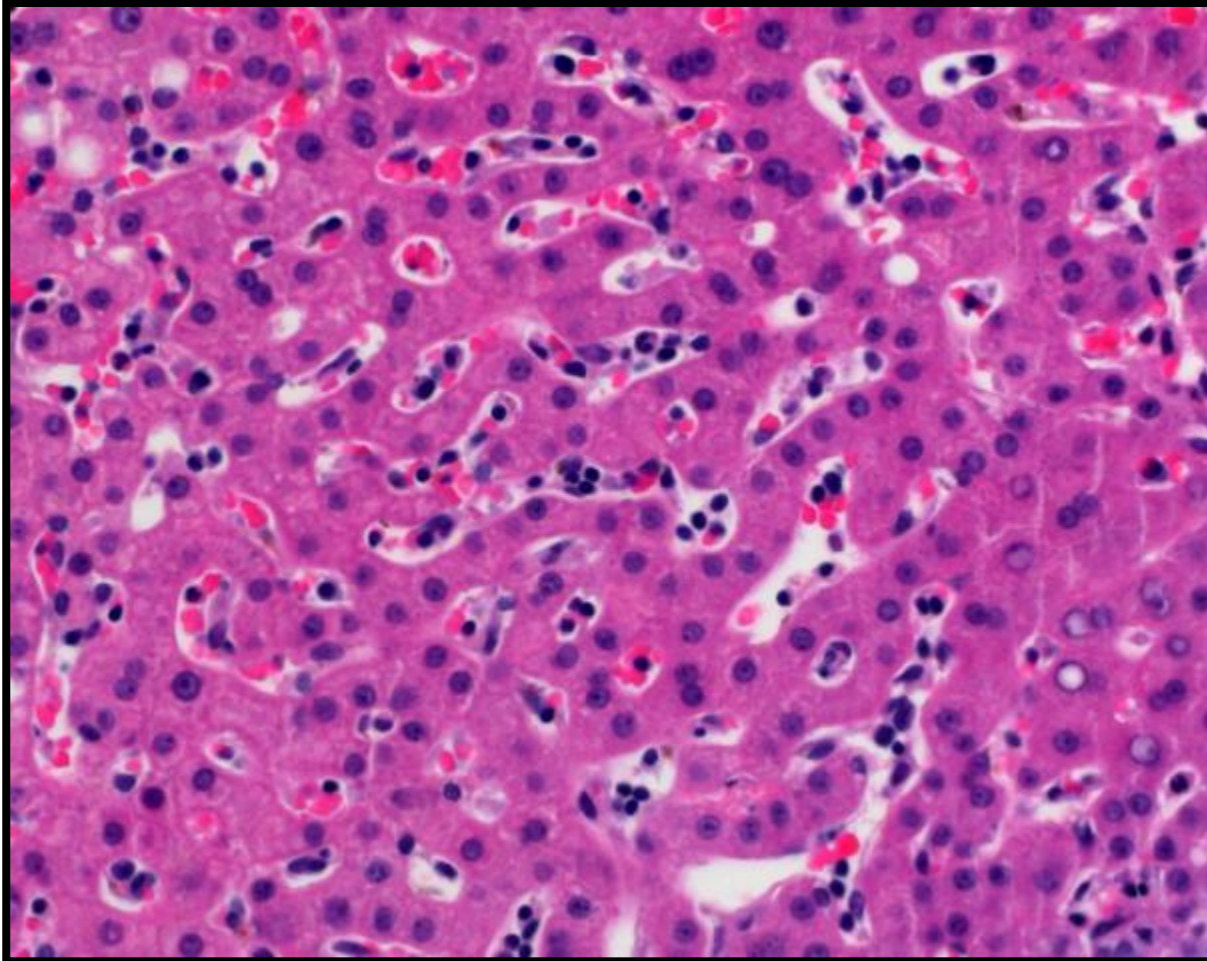


**SMA**

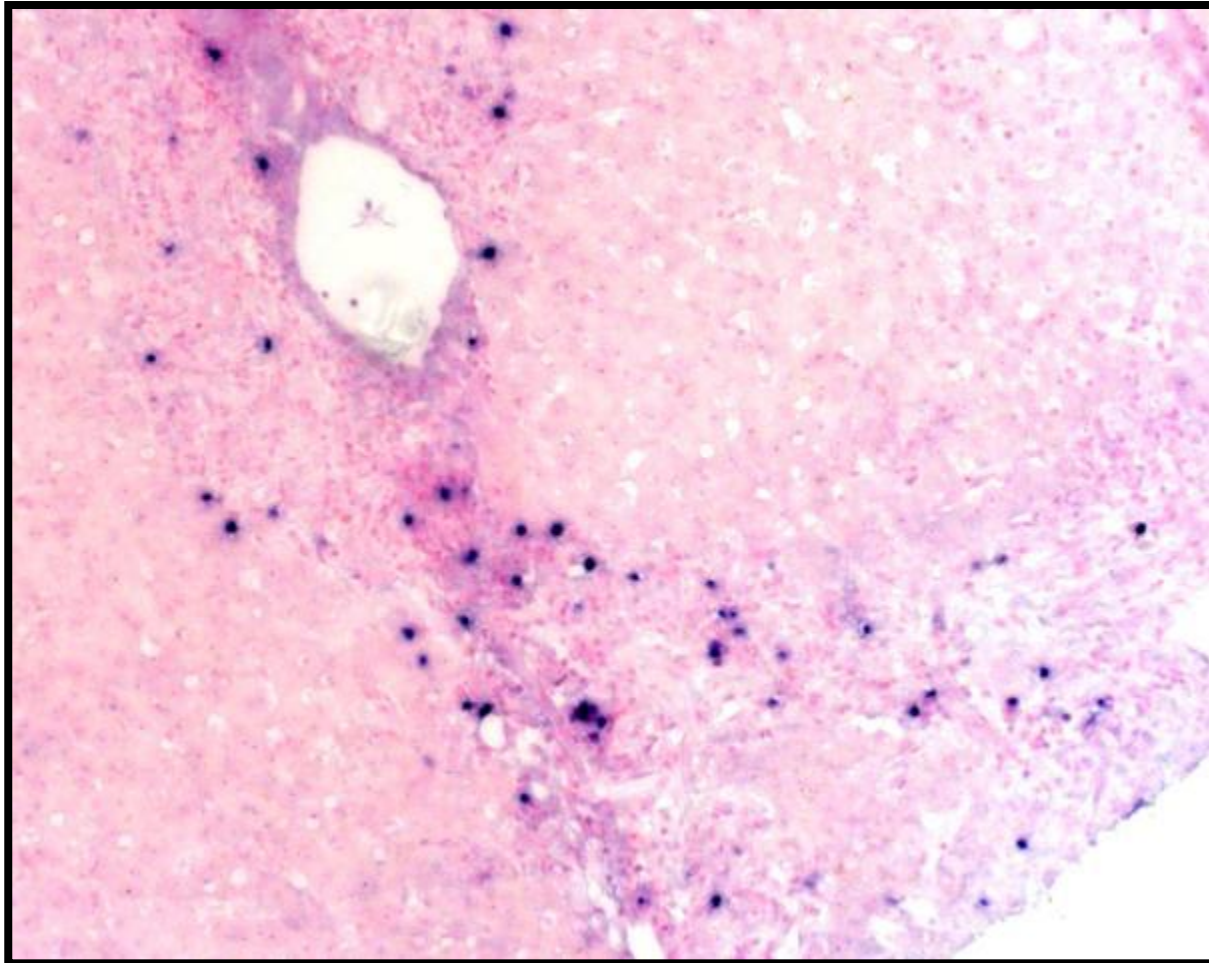


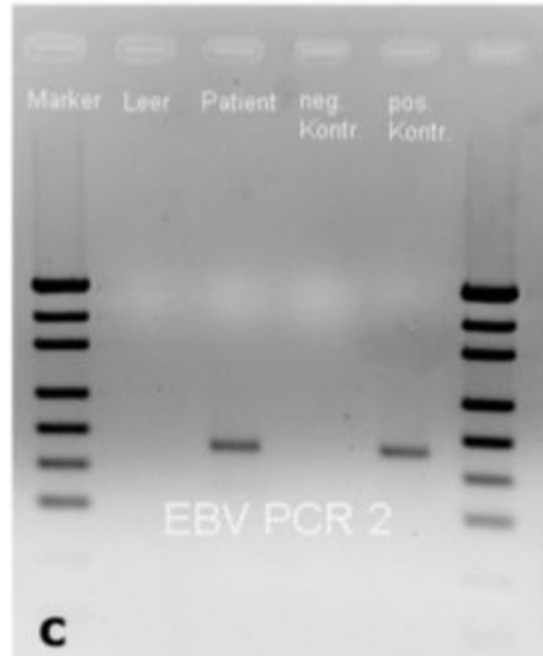
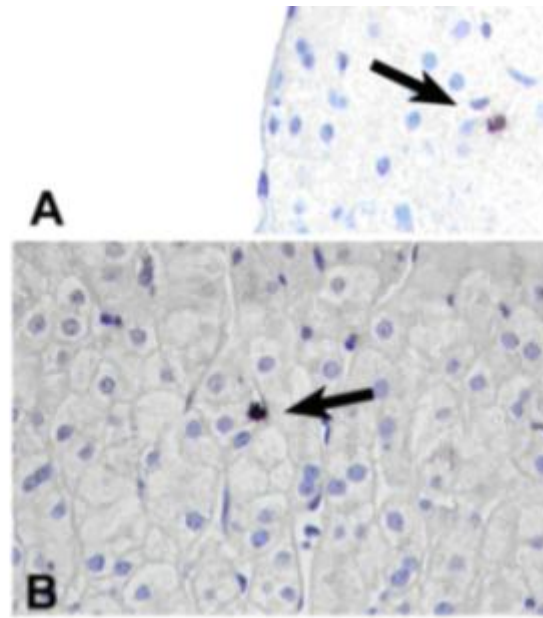
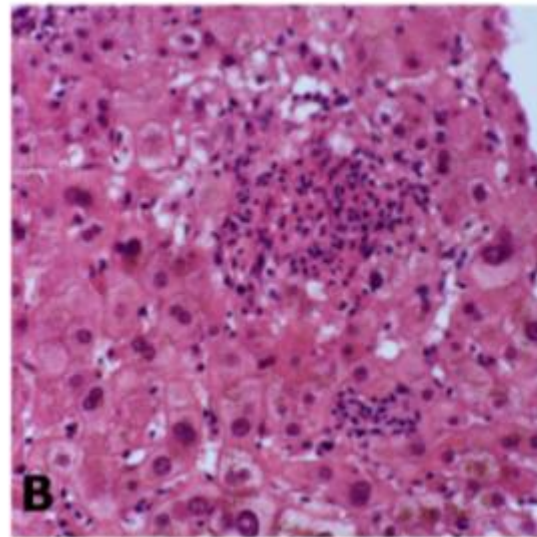
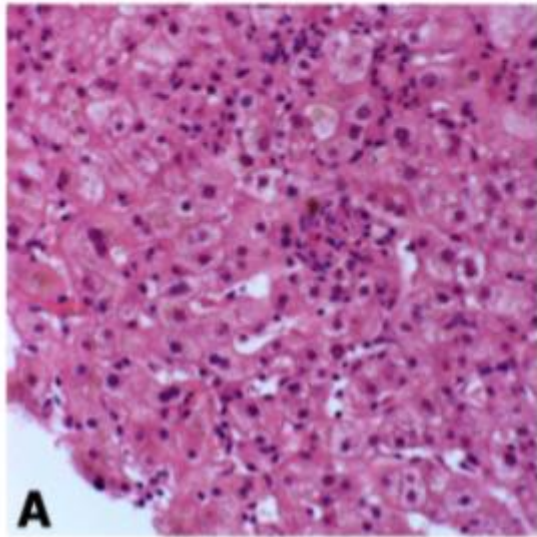


# Basel B



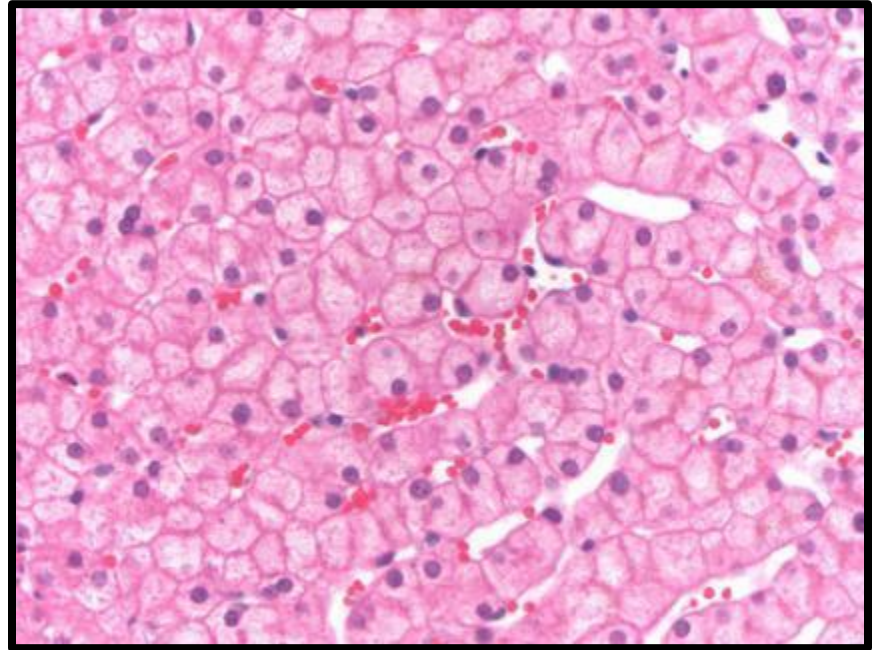
# Basel B: EBV hepatitis





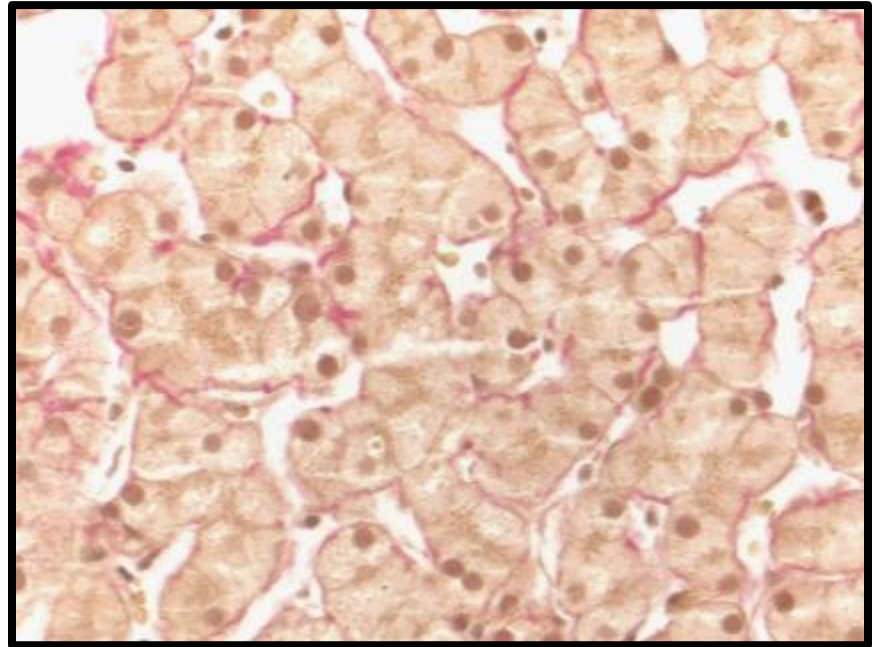
# Case study: Brisbane B

- 22 year old male
- Athlete; competitive swimmer
- Raised ALT > 100 persistent
- All serology negative
- Clinically well; no signs of CLD



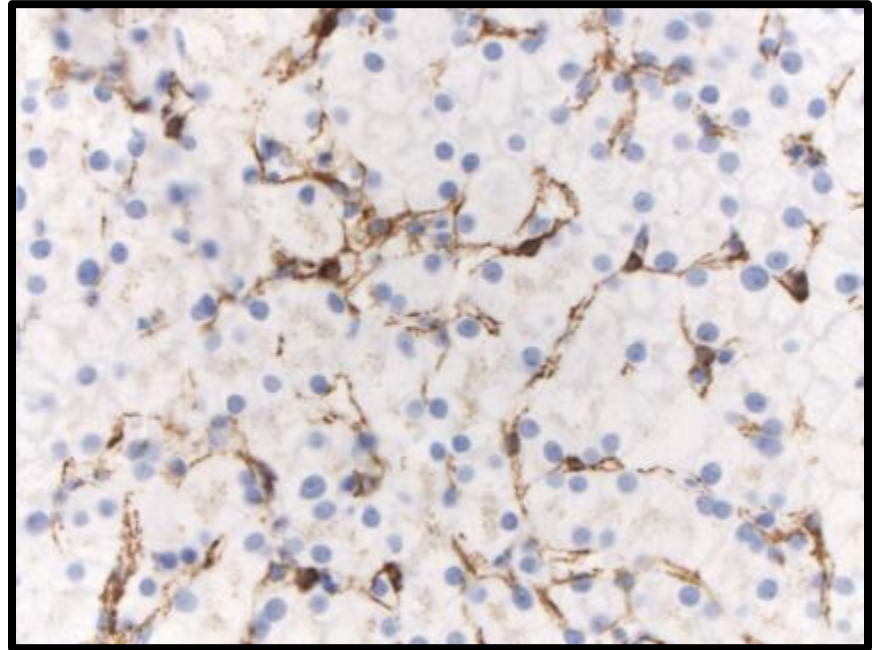
# Case study: Brisbane B

- 22 year old male
- Athlete; competitive swimmer
- Raised ALT > 100 persistent
- All serology negative
- Clinically well; no signs of CLD



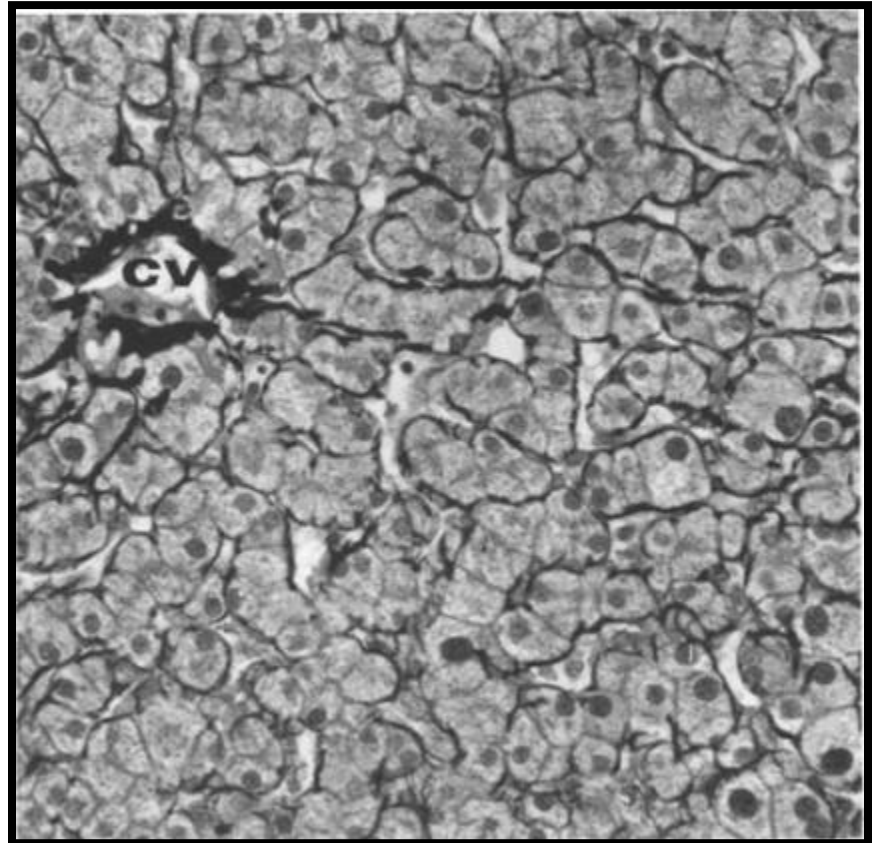
# Case study: Brisbane B

- 22 year old male
- Athlete; competitive swimmer
- Raised ALT > 100 persistent
- All serology negative
- Clinically well; no signs of CLD



# Diffuse sinusoidal “micro”fibrosis

- ITP (Lafon Virchows Arch A 1987)
  - platelet destruction and KC activation?
- Myelofibrosis (Degott Liver 1985; 5:276 -- Bordeaux )
  - PDGF elaboration? (had NRH)
- Post transplant: paediatric
- Diabetic patients – subsinusoidal collagen (I, II IV), stellate cell activation and BM (Letry Hum Pathol 1985; 18:775)



# Simple classification of sinusoidal lesions

- Infective
- Space of Disse obliteration
- Storage disorders
- Vascular
- Neoplastic
- Miscellaneous



# Simple classification of sinusoidal lesions

- **Infective**
- Space of Disse obliteration
- Storage disorders
- Vascular
- Neoplastic
- Miscellaneous
- Atypical mycobacteria
- Malaria (pigment)
- Schistosomiasis (pigment)
- Leishmaniasis
- Others

# Simple classification of sinusoidal lesions

- Infective
- Space of Disse obliteration
- Storage disorders
- Vascular
- Neoplastic
- Miscellaneous
- Amyloid
- Light chain disease
- Diffuse sinusoidal fibrosis

# Simple classification of sinusoidal lesions

- Infective
- Space of Disse obliteration
- **Storage disorders**
- Vascular
- Neoplastic
- Miscellaneous
- CESD
- Cystinosis
- GM1 gangliosidosis type III
- Fabry disease
- Metachromatic leukodystrophy
- Niemann-Pick disease
- Hypervitaminosis A

# Simple classification of sinusoidal lesions

- Infective
- Space of Disse obliteration
- Storage disorders
- **Vascular**
- Neoplastic
- Miscellaneous
- Sinusoidal obstruction syndrome and NRH
- Peliosis hepatis
- Microvascular flow abnormalities: sickle cell anaemia etc

# Simple classification of sinusoidal lesions

- Infective
- Space of Disse obliteration
- Storage disorders
- Vascular
- **Neoplastic**
- Miscellaneous
- Angiosarcoma
- Epithelioid haemangioendothelioma
- ? Angiomyolipoma
- Sarcomas
- Non-Langerhans histiocytosis
- Lymphoproliferative disease: T $\gamma$  $\delta$  lymphoma; EBV driven

# Gnomes in 2011: good news from the football field

