UK National Liver Histopathology EQA Scheme

Circulation L24_B

Case Response Analysis

Post meeting comments from EQA committee

97 responders 77 needed for consensus

This document gives information on individual cases in circulation L24_B of this scheme. It contains no personal details of participants.

Case Number: L24_B1

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Female 73. markedly elevated liver enzymes (ALT, AST); elevated IgG; ANA 1:640; positive anti-smooth msucle antigen. Sent ? AIH ? cirrhosis

Specimen: Liver core biopsy (transjugular)

Macroscopic: 2 cores of liver 12mm 9mm

Immunohistochemistry: H&E, Retic, Massons Trichrome, PAS slides sent

Original Diagnosis: cirrhosis; Autoimmune hepatitis

Tumour:	Popularity:
- No tumour/lesion present	99.0%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		92
- No tumour/lesion present	- No tumour/lesion present	4
		1

Pattern:	Popularity:
chronic hepatitis	76.3%
lobular hepatitis	37.1%
cholestasis, bilirubinostasis	5.2%
steatohepatitis	5.2%
steatosis	2.1%
not applicable	1.0%
chronic biliary disease	1.0%
Other (please specify in Comments)	1.0%

Pattern 1:	Pattern 2:	Count:
chronic hepatitis		46
lobular hepatitis		19
chronic hepatitis	lobular hepatitis	8
lobular hepatitis	chronic hepatitis	7
chronic hepatitis	cholestasis, bilirubinostasis	3
chronic hepatitis	steatohepatitis	3
chronic hepatitis	steatosis	2
lobular hepatitis	cholestasis, bilirubinostasis	2
chronic hepatitis	chronic biliary disease	1
chronic hepatitis	chronic hepatitis	1
steatohepatitis	chronic hepatitis	1
steatohepatitis		1
chronic hepatitis	not applicable	1
chronic hepatitis	Other (please specify in Comments)	1
		1

Stages:	Popularity:
advanced fibrosis with bridging and nodularity/cirrhosis	81.4%
hepatocyte loss or bridging - favour collapse not fibrosis	11.3%
Other (please specify in Comments)	4.1%
fibrosis with bridging between vascular structures	2.1%
no fibrosis/equivocal fibrosis	1.0%

Diagnostic categories:	Popularity:
autoimmune hepatitis	79.2%
acute / subacute hepatitis - autoimmune / drug / viral	13.2%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	3.8%
overlap syndrome	0.9%
storage disorder (please specify in comments box)	0.9%
Other (please enter alternative diagnosis in comments box)	0.9%
steatotic liver disease - metabolic dysfunction associated MASLD	0.9%

Diagnosis Combination:	Count:
autoimmune hepatitis	78
acute / subacute hepatitis - autoimmune / drug / viral	9
acute / subacute hepatitis - autoimmune / drug / viral, autoimmune hepatitis	4
autoimmune hepatitis, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	2
acute / subacute hepatitis - autoimmune / drug / viral, overlap syndrome	1
Other (please enter alternative diagnosis in comments box), steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1
steatotic liver disease - metabolic dysfunction associated MASLD, storage disorder (please specify in comments box)	1

Original report and further information (if any): cirrhosis; Autoimmune hepatitis

Points of consensus from dropdowns menus:

Tumour: NA

Pattern: consensus for CH and LH combined

Stage: consensus for advanced fibrosis with bridging and nodularity/cirrhosis

Diagnosis: consensus for AIH

Complete answer for 10 marks would include: AIH (anywhere in the response including as a differential) & advanced fibrosis with bridging/nodularity

If AIH or advanced fibrosis missing from response lose 5 for each, hence If both missing lose 10 (n=0).

Case Number: L24_B2

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Male 71. Presented acutely with DIC and deranged liver function tests. Oesophagectomy 6 months previously for poorly differentiated oesophageal adenocarcinoma. Was receiving adjuvant chemotherapy and immunotherapy.

Specimen: Liver biopsy (H&E only)

Macroscopic: 3 tan cores measuring 10, 9 and 8mm.

Immunohistochemistry: Nil

Original Diagnosis: Extensive sinusoidal infiltration by a poorly differentiated carcinoma. Morphologically comparable to the oesophageal primary

Tumour:	**Popularity:**
metastasis (further comment in Comments)	100.0%
- No tumour/lesion present	1.0%

Tumour 1:	**Tumour 2:**	**Count:**
metastasis (further comment in Comments)		94
metastasis (further comment in Comments)	metastasis (further comment in Comments)	2
metastasis (further comment in Comments)	- No tumour/lesion present	1

Pattern:	**Popularity:**
cholestasis, bilirubinostasis	79.4%
not applicable	12.4%
Other (please specify in Comments)	5.2%
within normal limits	1.0%
lobular hepatitis	1.0%

acute venous outflow obstruction	1.0%
vascular disease	1.0%

Pattern 1:	Pattern 2:	Count:
cholestasis, bilirubinostasis		71
not applicable		10
		5
cholestasis, bilirubinostasis	Other (please specify in Comments)	3
Other (please specify in Comments)		2
vascular disease		1
within normal limits		1
cholestasis, bilirubinostasis	acute venous outflow obstruction	1
lobular hepatitis	cholestasis, bilirubinostasis	1
cholestasis, bilirubinostasis	not applicable	1
not applicable	not applicable	1

Stages:	Popularity:
not applicable / no special stains to assess architecture	81.4%
no fibrosis/equivocal fibrosis	5.2%
mild/early fibrosis without bridging	1.0%
fibrosis with bridging between vascular structures	1.0%

Diagnostic categories:	Popularity:
Other (please enter alternative diagnosis in comments box)	41.2%
- not applicable (insufficient non-lesional tissue)	16.2%
drug induced liver injury (please specify in comments box)	16.2%
manifestation of systemic or extrahepatic disease (please specify in comments box)	14.7%
- no evidence of diffuse/background liver disease	10.3%
large bile duct obstruction	1.5%

Diagnosis Combination:	Count:
[No selections made]	33
Other (please enter alternative diagnosis in comments box)	25
- not applicable (insufficient non-lesional tissue)	11
drug induced liver injury (please specify in comments box)	8
manifestation of systemic or extrahepatic disease (please specify in comments box)	8
- no evidence of diffuse/background liver disease	7
drug induced liver injury (please specify in comments box), Other (please enter alternative diagnosis in comments box)	2
drug induced liver injury (please specify in comments box), manifestation of systemic or extrahepatic disease (please specify in comments box)	1
large bile duct obstruction	1
manifestation of systemic or extrahepatic disease (please specify in comments box), Other (please enter alternative diagnosis in comments box)	1

Original report and further information (if any): Extensive sinusoidal infiltration by a poorly differentiated carcinoma. Morphologically comparable to the oesophageal primary

Points of consensus from dropdowns menus:

Tumour: 100% consensus for metastasis

Pattern: 77 people mentioned cholestasis & bilrubinostasis in pattern 1 or 2 (not scoring on background)

Stage: Majority (81%) - NA and another 5% no fibrosis

Diagnosis: No consensus

Complete answer for 10 marks would include: Metastasis (ideally some mention in comments of morphology in keeping with oesophageal primary but this will not be used for scoring)

Case Number: L24_B3

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Female 59. on request form' intrahepatic cholangiocarcinoma'

Specimen: Liver resection

Macroscopic: 1217g right hemihepatectomy. 103mm pale firm tumour clear of the margin.

Immunohistochemistry: Cytokeratins 7 and 20 and CDX2 provided.

Original Diagnosis: met of colorectal carcinoma.

Tumour:	**Popularity:**
metastasis (further comment in Comments)	91.8%
Other (please specify in Comments)	7.2%
cholangiocarcinoma	3.1%
- No tumour/lesion present	2.1%
biliary hamartoma / von Meyenberg complex	1.0%

Tumour 1:	**Tumour 2:**	**Count:**
metastasis (further comment in Comments)		83
Other (please specify in Comments)		7
metastasis (further comment in Comments)	- No tumour/lesion present	2
metastasis (further comment in Comments)	biliary hamartoma / von Meyenberg complex	1
metastasis (further comment in Comments)	cholangiocarcinoma	1
cholangiocarcinoma	metastasis (further comment in Comments)	1
metastasis (further comment in Comments)	metastasis (further comment in Comments)	1
cholangiocarcinoma		1

Pattern:	**Popularity:**
steatosis	75.3%
steatohepatitis	10.3%

not applicable	6.2%
Other (please specify in Comments)	4.1%
within normal limits	2.1%
chronic biliary disease	2.1%

Pattern 1:	Pattern 2:	Count:
steatosis		68
		8
steatohepatitis		6
not applicable		5
steatosis	Other (please specify in Comments)	3
within normal limits		2
steatohepatitis	chronic biliary disease	1
steatosis	chronic biliary disease	1
steatohepatitis	not applicable	1
steatohepatitis	Other (please specify in Comments)	1
steatosis	steatohepatitis	1

Stages:	Popularity:
not applicable / no special stains to assess architecture	62.9%
no fibrosis/equivocal fibrosis	21.6%
mild/early fibrosis without bridging	2.1%
fibrosis with bridging between vascular structures	1.0%

Diagnostic categories:	Popularity:
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	61.2%
Other (please enter alternative diagnosis in comments box)	16.4%
steatotic liver disease - metabolic dysfunction associated MASLD	10.4%
manifestation of systemic or extrahepatic disease (please specify in comments box)	6.0%
- histologically indeterminate for cause	1.5%
- no evidence of diffuse/background liver disease	1.5%
chronic cholangiopathy NOS	1.5%
steatotic liver disease - alcohol related liver disease	1.5%

Diagnosis Combination:	Count:
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	37
[No selections made]	34
Other (please enter alternative diagnosis in comments box)	9
steatotic liver disease - metabolic dysfunction associated MASLD	7
manifestation of systemic or extrahepatic disease (please specify in comments box)	3
Other (please enter alternative diagnosis in comments box), steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	2
- histologically indeterminate for cause	1
- no evidence of diffuse/background liver disease	1
chronic cholangiopathy NOS, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1
manifestation of systemic or extrahepatic disease (please specify in comments box), steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1

steatotic liver disease - alcohol related liver disease	1

Original report and further information (if any): met of colorectal carcinoma.

Points of consensus from dropdowns menus:

Tumour: Metastasis

Pattern: No consensus for steatosis or SH alone but is consensus if combined

Stage: Majority NA

Diagnosis: steatotic liver disease aetiologies don't reach consensus.

Complete answer for 10 marks would include: Metastasis. Most favour colorectal, 2 don't specify, 1 favours HPB and 1 considers variant CCA – just 'metastasis' for scoring).

(steatosis & steatohepatitis patterns combined does reach a consensus and ideally participants should mention the background liver and could potentially lose marks in future circulations)

If just saying cholangioCA and no mention of metastasis in comments – lose 5 n=0

Case Number: L24_B4

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Male 45. 46M presenting with deranged LFTs. History of significant alcohol excess and anabolic steroid use. Type 1 diabetic.

Specimen: Liver biopsy (H&E and EPSR)

Macroscopic: Liver biopsy

Immunohistochemistry: Sirius red

Original Diagnosis: Secondary biliary features which are suggestive of a stricture/abnormality on large intrahepatic bile ducts or the extrahepatic biliary tree and radiological correlation is advised in the first instance. There is no significant steatotic liver disease. Mild fibrosis.

Tumour:	**Popularity:**
- No tumour/lesion present	95.9%
hepatocellular adenoma inflammatory	1.0%

Tumour 1:	**Tumour 2:**	**Count:**
- No tumour/lesion present		90
		3
- No tumour/lesion present	- No tumour/lesion present	3

hepatocellular adenoma inflammatory	1

Pattern:	Popularity:
cholestasis, bilirubinostasis	95.9%
Other (please specify in Comments)	18.6%
chronic biliary disease	6.2%
vascular disease	5.2%
lobular hepatitis	5.2%
not applicable	3.1%
chronic hepatitis	2.1%
steatohepatitis	2.1%
steatosis	1.0%
acute venous outflow obstruction	1.0%

Pattern 1:	Pattern 2:	Count:
cholestasis, bilirubinostasis		53
cholestasis, bilirubinostasis	Other (please specify in Comments)	17
cholestasis, bilirubinostasis	chronic biliary disease	4
cholestasis, bilirubinostasis	lobular hepatitis	3
cholestasis, bilirubinostasis	vascular disease	3
cholestasis, bilirubinostasis	not applicable	2
chronic biliary disease	cholestasis, bilirubinostasis	2
lobular hepatitis	cholestasis, bilirubinostasis	2
Other (please specify in Comments)	cholestasis, bilirubinostasis	1
steatohepatitis	cholestasis, bilirubinostasis	1
vascular disease	cholestasis, bilirubinostasis	1
not applicable		1
steatosis		1
vascular disease		1
cholestasis, bilirubinostasis	acute venous outflow obstruction	1
chronic hepatitis	cholestasis, bilirubinostasis	1
cholestasis, bilirubinostasis	chronic hepatitis	1
cholestasis, bilirubinostasis	steatohepatitis	1
		1

Stages:	Popularity:
no fibrosis/equivocal fibrosis	49.5%
mild/early fibrosis without bridging	43.3%
not applicable / no special stains to assess architecture	3.1%
fibrosis with bridging between vascular structures	2.1%
subtle architectural abnormalities, vascular disease	1.0%
Other (please specify in Comments)	1.0%

Diagnostic categories:	Popularity:
drug induced liver injury (please specify in comments box)	59.5%
large bile duct obstruction	24.3%
Other (please enter alternative diagnosis in comments box)	9.0%
chronic cholangiopathy NOS	1.8%
steatotic liver disease - alcohol related liver disease	0.9%

steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	0.9%
acute / subacute hepatitis - autoimmune / drug / viral	0.9%
primary biliary cholangitis	0.9%
primary sclerosing cholangitis	0.9%
ascending cholangitis	0.9%

Diagnosis Combination:	**Count:**
drug induced liver injury (please specify in comments box)	51
large bile duct obstruction	21
drug induced liver injury (please specify in comments box), large bile duct obstruction	6
drug induced liver injury (please specify in comments box), Other (please enter alternative diagnosis in comments box)	5
Other (please enter alternative diagnosis in comments box)	5
chronic cholangiopathy NOS, drug induced liver injury (please specify in comments box)	2
[No selections made]	1
acute / subacute hepatitis - autoimmune / drug / viral	1
ascending cholangitis, drug induced liver injury (please specify in comments box)	1
drug induced liver injury (please specify in comments box), steatotic liver disease - alcohol related liver disease	1
primary biliary cholangitis	1
primary sclerosing cholangitis	1
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1

Original report and further information (if any): Secondary biliary features which are suggestive of a stricture/abnormality on large intrahepatic bile ducts or the extrahepatic biliary tree and radiological correlation is advised in the first instance. There is no significant steatotic liver disease. Mild fibrosis.

Points of consensus from dropdowns menus:

Tumour: Consensus for none, 1 selects adenoma inflammatory and nil else, no comment.

Pattern: Cholestasis / bilirubinostasis

Stage: Consensus for no / early fibrosis … not for either on own

Diagnosis: no consensus : 45 DILI only
9 LDO only
38 DILI + LDO

Complete answer for 10 marks would include: Cholestasis / bilirubinostasis and no / early fibrosis

If missing either the pattern (3 people) or the comment on stage or advanced fibrosis (4 people) from response lose 5

If no response for pattern or stage, selects HCA only, lose 10 (1 person)

Case Number: L24_B5

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Male 54. Treated as cirrhotic based on Fibroscan (16.1 KPa). Presumed MASLD. Ultrasound showed fatty liver with no evidence of focal lesions but the liver was mildly enlarged. Negative serology. History of asthma, type 2 diabetes, hypertension.

Specimen: biopsy

Macroscopic: 2 cores 14 and 12mm

Immunohistochemistry: HVG

Original Diagnosis: Steatohepatitis with mild to moderate fibrosis (

Tumour:	Popularity:
bile duct adenoma / peribiliary gland hamartoma	75.3%
biliary hamartoma / von Meyenberg complex	73.2%
- No tumour/lesion present	11.3%
Other (please specify in Comments)	3.1%
cholangiocarcinoma	1.0%

Tumour 1:	Tumour 2:	Count:
bile duct adenoma / peribiliary gland hamartoma	biliary hamartoma / von Meyenberg complex	31
biliary hamartoma / von Meyenberg complex	bile duct adenoma / peribiliary gland hamartoma	26
biliary hamartoma / von Meyenberg complex		12
bile duct adenoma / peribiliary gland hamartoma		11
- No tumour/lesion present		6
		2
- No tumour/lesion present	bile duct adenoma / peribiliary gland hamartoma	2
bile duct adenoma / peribiliary gland hamartoma	Other (please specify in Comments)	2
- No tumour/lesion present	biliary hamartoma / von Meyenberg complex	1
cholangiocarcinoma	cholangiocarcinoma	1
Other (please specify in Comments)		1
bile duct adenoma / peribiliary gland hamartoma	- No tumour/lesion present	1
biliary hamartoma / von Meyenberg complex	- No tumour/lesion present	1

Pattern:	Popularity:
steatohepatitis	87.6%
steatosis	16.5%
Other (please specify in Comments)	4.1%
not applicable	1.0%

Pattern 1:	Pattern 2:	Count:
steatohepatitis		74
steatosis		10

steatosis	steatohepatitis	4
steatohepatitis	Other (please specify in Comments)	3
steatohepatitis	steatosis	2
steatohepatitis	steatohepatitis	1
steatohepatitis	not applicable	1
		1
Other (please specify in Comments)		1

Stages:	**Popularity:**
mild/early fibrosis without bridging	80.4%
no fibrosis/equivocal fibrosis	12.4%
fibrosis with bridging between vascular structures	6.2%
Other (please specify in Comments)	1.0%

Diagnostic categories:	**Popularity:**
steatotic liver disease - metabolic dysfunction associated MASLD	68.6%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	21.6%
ductal plate malformation/polycystic liver disease/congenital hepatic fibrosis	4.9%
Other (please enter alternative diagnosis in comments box)	3.9%
manifestation of systemic or extrahepatic disease (please specify in comments box)	1.0%

Diagnosis Combination:	**Count:**
steatotic liver disease - metabolic dysfunction associated MASLD	67
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	18
[No selections made]	3
ductal plate malformation/polycystic liver disease/congenital hepatic fibrosis, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	3
Other (please enter alternative diagnosis in comments box), steatotic liver disease - metabolic dysfunction associated MASLD	2
ductal plate malformation/polycystic liver disease/congenital hepatic fibrosis, manifestation of systemic or extrahepatic disease (please specify in comments box)	1
ductal plate malformation/polycystic liver disease/congenital hepatic fibrosis, steatotic liver disease - metabolic dysfunction associated MASLD	1
Other (please enter alternative diagnosis in comments box)	1
Other (please enter alternative diagnosis in comments box), steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1

Original report and further information (if any): Steatohepatitis with mild to moderate fibrosis (

Points of consensus from dropdowns menus:

Tumour: consensus (84) for benign biliary lesion but 60 put 2 lesions . 15 hamartoma only . 13 BDA only

Pattern: consensus for steatohepatitis 81 . 14 steatosis

Stage: consensus for early fibrosis >80%

Diagnosis: consensus for steatotic liver disease 92

Complete answer for 10 marks would include: all the above 4 points ; at least 1 benign biliary lesion, steatohepatitis, mild/early fibrosis and diagnosis of steatotic liver disease with aetiology either MASLD or Met-ALD.

If any one missing from response: lose 5 (16 people for pattern) (2 for diagnosis) (17 for stage) not scores cumulatively.

If diagnosis of cholangiocarcinoma lose 10 (1 person)

Case Number: L24_B6

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Female 66. Female 66YO with MASLD cirrhosis. Liver transplant today.

Specimen: Liver explant

Macroscopic: Liver explant specimen with nodular appearance. 3mm white lesion noted in segment 2.

Immunohistochemistry: None

Original Diagnosis: Bile duct adenoma. Background cirrhosis consistent with MASLD.

Tumour:	Popularity:
bile duct adenoma / peribiliary gland hamartoma	83.5%
cholangiocarcinoma	8.2%
biliary hamartoma / von Meyenberg complex	4.1%
- No tumour/lesion present	3.1%
focal nodular hyperplasia	3.1%
Other (please specify in Comments)	2.1%
metastasis (further comment in Comments)	0.0%

Tumour 1:	Tumour 2:	Count:
bile duct adenoma / peribiliary gland hamartoma		78
cholangiocarcinoma		7
focal nodular hyperplasia		3
biliary hamartoma / von Meyenberg complex		3
Other (please specify in Comments)		1
bile duct adenoma / peribiliary gland hamartoma	- No tumour/lesion present	1
biliary hamartoma / von Meyenberg complex	- No tumour/lesion present	1
cholangiocarcinoma	- No tumour/lesion present	1
bile duct adenoma / peribiliary gland hamartoma	bile duct adenoma / peribiliary gland hamartoma	1

bile duct adenoma / peribiliary gland hamartoma	Other (please specify in Comments)	1

Pattern:	Popularity:
steatohepatitis	67.0%
steatosis	30.9%
abnormal, no pattern discernible	1.0%
Other (please specify in Comments)	1.0%
not applicable	1.0%
lobular hepatitis	1.0%

Pattern 1:	Pattern 2:	Count:
steatohepatitis		61
steatosis		26
		3
steatosis	steatohepatitis	2
steatohepatitis	steatosis	1
abnormal, no pattern discernible		1
Other (please specify in Comments)		1
steatosis	lobular hepatitis	1
steatohepatitis	not applicable	1

Stages:	Popularity:
advanced fibrosis with bridging and nodularity/cirrhosis	97.9%
not applicable / no special stains to assess architecture	1.0%

Diagnostic categories:	Popularity:
steatotic liver disease - metabolic dysfunction associated MASLD	73.8%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	22.6%
Other (please enter alternative diagnosis in comments box)	2.4%
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	1.2%

Diagnosis Combination:	Count:
steatotic liver disease - metabolic dysfunction associated MASLD	60
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	19
[No selections made]	15
Other (please enter alternative diagnosis in comments box), steatotic liver disease - metabolic dysfunction associated MASLD	2
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	1

Original report and further information (if any): Bile duct adenoma. Background cirrhosis consistent with MASLD.

Points of consensus from dropdowns menus:
Tumour: Consensus for BDA/ peri gland hamartoma 78

Pattern: consensus for combo (88) of steatohepatitis (65) and steatosis (23), not on their own

Stage: consensus for stage 97.9%

Diagnosis: Consensus for diagnosis of steatotic liver disease 81

Complete answer for 10 marks would include bile duct adenoma BDA and stage (advanced/cirrhosis) and steatotic liver disease including aetiologies.

If any missing from response lose 5; any benign lesion (8 people) , stage (2 people) disease (15 people)

If diagnosis of cholangiocarcinoma lose 10 (8 people)

Case Number: L24_B7

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Female 65. 67yo background CLL. Acute hepatitis with jaundice. Hep A-E, CMV, EBV negative. IgG normal. No recent antibiotics/ culprit drugs. Biopsy 'autoimmune hepatitis ? viral ? other.

Specimen: Native liver, needle biopsy

Macroscopic: Core

Immunohistochemistry: The lymphoid cells are strongly and diffusely positive for CD20, BCL2, CD5 and CD23, and are negative for cyclinD1, CD10 and BCL6. MUM1 is strongly positive in the proliferation centres. The proliferation fraction on a MIB1 stain is very low < 10%.

Original Diagnosis: Liver infiltration (predominantly portal tracts, overall ~ 30% of tissue cores) by small lymphocytic lymphoma/ chronic lymphocytic leukaemia

Tumour:	**Popularity:**
leukaemia/lymphoma (please specify in Comments)	96.9%
- No tumour/lesion present	3.1%
metastasis (further comment in Comments)	1.0%
Other (please specify in Comments)	1.0%

Tumour 1:	**Tumour 2:**	**Count:**
leukaemia/lymphoma (please specify in Comments)		91
leukaemia/lymphoma (please specify in Comments)	- No tumour/lesion present	2
leukaemia/lymphoma (please specify in Comments)	leukaemia/lymphoma (please specify in Comments)	1
metastasis (further comment in Comments)		1
Other (please specify in Comments)		1
- No tumour/lesion present		1

Pattern:	**Popularity:**
not applicable	23.7%

lobular hepatitis	20.6%
Other (please specify in Comments)	15.5%
within normal limits	14.4%
cholestasis, bilirubinostasis	6.2%
abnormal, no pattern discernible	6.2%
chronic hepatitis	2.1%

Pattern 1:	Pattern 2:	Count:
not applicable		22
lobular hepatitis		17
		15
Other (please specify in Comments)		14
within normal limits		14
abnormal, no pattern discernible		6
cholestasis, bilirubinostasis		2
chronic hepatitis		2
cholestasis, bilirubinostasis	cholestasis, bilirubinostasis	1
lobular hepatitis	cholestasis, bilirubinostasis	1
cholestasis, bilirubinostasis	lobular hepatitis	1
lobular hepatitis	not applicable	1
cholestasis, bilirubinostasis	Other (please specify in Comments)	1

Stages:	Popularity:
not applicable / no special stains to assess architecture	73.2%
no fibrosis/equivocal fibrosis	14.4%
mild/early fibrosis without bridging	2.1%

Diagnostic categories:	Popularity:
Other (please enter alternative diagnosis in comments box)	36.0%
manifestation of systemic or extrahepatic disease (please specify in comments box)	34.7%
- no evidence of diffuse/background liver disease	13.3%
- not applicable (insufficient non-lesional tissue)	6.7%
acute / subacute hepatitis - autoimmune / drug / viral	6.7%
autoimmune hepatitis	1.3%
- histologically indeterminate for cause	1.3%

Diagnosis Combination:	Count:
[No selections made]	26
Other (please enter alternative diagnosis in comments box)	25
manifestation of systemic or extrahepatic disease (please specify in comments box)	23
- no evidence of diffuse/background liver disease	9
- not applicable (insufficient non-lesional tissue)	5
acute / subacute hepatitis - autoimmune / drug / viral	3
- histologically indeterminate for cause	1
- no evidence of diffuse/background liver disease, manifestation of systemic or extrahepatic disease (please specify in comments box)	1
acute / subacute hepatitis - autoimmune / drug / viral, manifestation of systemic or extrahepatic disease (please specify in comments box)	1
acute / subacute hepatitis - autoimmune / drug / viral, Other (please enter alternative diagnosis in comments box)	1
autoimmune hepatitis	1

manifestation of systemic or extrahepatic disease (please specify in comments box), Other (please enter alternative diagnosis in comments box)	1

Original report and further information (if any): Liver infiltration (predominantly portal tracts, overall ~ 30% of tissue cores) by small lymphocytic lymphoma/ chronic lymphocytic leukaemia

***Tumour**: Consensus for "leukaemia/lymphoma"; 94 participants selected this. 3 did not but referred to lymphoma/leukaemia in comments. 91 participants specified CLL +/- SLL.*

***Pattern**: None. 21 selected a hepatitis pattern +/- referenced hepatitis in comments (6 also selected a hepatitis response in "Diagnoses"; 5 provided comments suggesting it was secondary to CLL/SLL or paraneoplastic).*

***Stage**: No consensus ("No stains" most common)*

***Diagnosis**: No consensus from dropdown but consensus for Leukaemia/lymphoma, specifically CLL/SLL*

Complete answer for 10 marks would include: Lymphoma or leukaemia anywhere in answer. No deduction for not specifying CLL/SLL

Lose 5: No participants. Some participants suggested a second diagnosis of hepatitis, including one person suggesting AIH but panel feel that this does not merit a reduction in marks.
Lose 10: No participants

Case Number: L24_B8

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Female 42. Presented with portal hypertension of unclear cause. Originally from Philippines moved to the UK five years ago. Grew up in a rural village.

Specimen: Liver biopsy (H/E only)

Macroscopic: Liver - multiple cream fragments, the largest measuring 5mm and the smallest 3mm. n[1]nr

Immunohistochemistry: None

Original Diagnosis: Schistosomiasis

Tumour:	**Popularity:**
- No tumour/lesion present	84.5%
Other (please specify in Comments)	14.4%
cyst (non-neoplastic)	1.0%

Tumour 1:	**Tumour 2:**	**Count:**
- No tumour/lesion present		78
Other (please specify in Comments)		13

- No tumour/lesion present	- No tumour/lesion present	3
Other (please specify in Comments)	- No tumour/lesion present	1
cyst (non-neoplastic)		1
		1

Pattern:	Popularity:
Other (please specify in Comments)	71.1%
within normal limits	13.4%
steatosis	9.3%
not applicable	7.2%
chronic hepatitis	2.1%
vascular disease	2.1%

Pattern 1:	Pattern 2:	Count:
Other (please specify in Comments)		62
within normal limits		11
not applicable		5
Other (please specify in Comments)	steatosis	4
steatosis		4
		3
chronic hepatitis		1
vascular disease		1
chronic hepatitis	chronic hepatitis	1
within normal limits	not applicable	1
Other (please specify in Comments)	Other (please specify in Comments)	1
steatosis	Other (please specify in Comments)	1
vascular disease	Other (please specify in Comments)	1
not applicable	within normal limits	1

Stages:	Popularity:
not applicable / no special stains to assess architecture	68.0%
Other (please specify in Comments)	9.3%
no fibrosis/equivocal fibrosis	6.2%
mild/early fibrosis without bridging	5.2%
fibrosis with bridging between vascular structures	2.1%
advanced fibrosis with bridging and nodularity/cirrhosis	1.0%

Diagnostic categories:	Popularity:
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	71.9%
Other (please enter alternative diagnosis in comments box)	20.8%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	3.1%
manifestation of systemic or extrahepatic disease (please specify in comments box)	2.1%
steatotic liver disease - metabolic dysfunction associated MASLD	1.0%
- not applicable (insufficient non-lesional tissue)	1.0%

Diagnosis Combination:	Count:
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	65
Other (please enter alternative diagnosis in comments box)	20
[No selections made]	5

non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box), steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	3
manifestation of systemic or extrahepatic disease (please specify in comments box)	2
- not applicable (insufficient non-lesional tissue)	1
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box), steatotic liver disease - metabolic dysfunction associated MASLD	1

Original report and further information (if any): Schistosomiasis

***Tumour**: Not applicable*

***Pattern**: "Other"! (within normal limits and steatosis most common after "other")*

***Stage**: No consensus/Not applicable.*
~19 refer to presence fibrosis in dropdown and/or comments (mild, portal most common)

***Diagnosis**: No consensus for any single category in diagnoses dropdown. 91 participants refer to possible or likely schistosomiasis. Remainder all referred to infection (fluke NOS = 1; echinococcal = 1; clonorchis = 2; ascaris = 2)*

***Complete answer for 10 marks would include**: Schistosomiasis*

***Lose 5** - If mention parasitic infection but alternative to schistosomiasis*
***Lose 10** – no participants*

Case Number: L24_B9

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Male 75. Left hepatectomy for multiple HCCs. Background haemochromatosis

Specimen: Left hemihepatectomy

Macroscopic: Left hepatectomy specimen containing two lesions measuring 36mm and 70mm respectively.

Immunohistochemistry: One tumour block, background liver block, VG and Perls stain.

Original Diagnosis: Moderately differentiated hepatocellular carcinoma. Background liver grade 1 siderosis consistent with haemochromatosis (treated). Advanced bridging fibrosis with early nodularity suggestive of evolving cirrhosis.

Tumour:	**Popularity:**
hepatocellular carcinoma	95.9%
hepatocellular carcinoma variant (specify in Comments)	3.1%
- No tumour/lesion present	3.1%
focal nodular hyperplasia	1.0%

metastasis (further comment in Comments)	1.0%
Other (please specify in Comments)	1.0%

Tumour 1:	Tumour 2:	Count:
hepatocellular carcinoma		87
hepatocellular carcinoma variant (specify in Comments)		3
hepatocellular carcinoma	- No tumour/lesion present	2
- No tumour/lesion present	hepatocellular carcinoma	1
focal nodular hyperplasia	hepatocellular carcinoma	1
hepatocellular carcinoma	hepatocellular carcinoma	1
hepatocellular carcinoma	Other (please specify in Comments)	1
metastasis (further comment in Comments)		1

Pattern:	Popularity:
iron overload	95.9%
steatosis	58.8%
steatohepatitis	2.1%
vascular disease	1.0%
chronic hepatitis	1.0%
not applicable	1.0%

Pattern 1:	Pattern 2:	Count:
iron overload	steatosis	41
iron overload		35
steatosis	iron overload	13
steatosis		2
iron overload	iron overload	1
steatohepatitis	iron overload	1
not applicable		1
iron overload	steatohepatitis	1
chronic hepatitis	steatosis	1
iron overload	vascular disease	1

Stages:	Popularity:
advanced fibrosis with bridging and nodularity/cirrhosis	66.0%
fibrosis with bridging between vascular structures	33.0%
no fibrosis/equivocal fibrosis	1.0%

Diagnostic categories:	Popularity:
iron overload, hereditary	70.2%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	21.0%
Other (please enter alternative diagnosis in comments box)	4.0%
steatotic liver disease - metabolic dysfunction associated MASLD	2.4%
iron overload - acquired, secondary	2.4%

Diagnosis Combination:	Count:
iron overload, hereditary	55

iron overload, hereditary, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	26
[No selections made]	5
iron overload - acquired, secondary	3
iron overload, hereditary, Other (please enter alternative diagnosis in comments box)	3
iron overload, hereditary, steatotic liver disease - metabolic dysfunction associated MASLD	3
Other (please enter alternative diagnosis in comments box)	2

Original report and further information (if any): Moderately differentiated hepatocellular carcinoma. Background liver grade 1 siderosis consistent with haemochromatosis (treated). Advanced bridging fibrosis with early nodularity suggestive of evolving cirrhosis.

Points of consensus from dropdowns menus:
***Tumour**: Hepatocellular carcinoma (n = 96 participants in total incl. 1 person as a second diagnosis after FNH i.e. FNH in one slide, HCC in other)*

***Pattern**: Iron overload (96 participants); all refer to iron accumulation when comments taken into consideration. No consensus for steatosis (~46 of participants refer to it somewhere in answer)*

***Stage**: No individual consensus, but can combine bridging and advanced bridging with nodularity to reach a consensus. 1 person selected "no fibrosis" but mentions cirrhosis in comments*

***Diagnosis**: Iron overload, hereditary. 2 participants referred to acquired iron overload but both refer to haemochromatosis in comments*

***Complete answer for 10 marks would include**: HCC, iron overload with reference to hereditary or haemochromatosis in comments; and either bridging fibrosis or cirrhosis (dropdown or in comments)*

***Lose 5** – metastasis (as opposed to losing 10) as stated favour NET rather than HCC, "subject to immunophenotyping". FNH comment won't lose marks as did diagnose HCC.*

***Lose 10 –** No participants*

Case Number: L24_B10

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Female 66. recent flu-like symptoms; hepatosplenomegaly; elevated IgG(17.64) and IgM (3.27). ALT 1019; AST 1640; ALK phosphatase 288; GGT 235; AMA-M2 positive; ANA 1:80; Anti-smooth muscle neg; LKM neg sent ? AIH/ PBC/ Lymphoma

Specimen: Liver core biopsy

Macroscopic: one core liver 17mm length

Immunohistochemistry: H&E; retic; PAS; Massons Trichrome

Original Diagnosis: Primary biliary cholangitis. Possible PBC-AIH overlap given lab results and histology; no significant fibrosis; no evidence of lymphoma

Tumour:	Popularity:
- No tumour/lesion present	92.8%
Other (please specify in Comments)	3.1%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		87
		4
Other (please specify in Comments)		3
- No tumour/lesion present	- No tumour/lesion present	3

Pattern:	Popularity:
lobular hepatitis	55.7%
chronic biliary disease	46.4%
chronic hepatitis	42.3%
Other (please specify in Comments)	7.2%
not applicable	1.0%
steatohepatitis	1.0%
cholestasis, bilirubinostasis	1.0%

Pattern 1:	Pattern 2:	Count:
lobular hepatitis		17
chronic hepatitis		15
chronic biliary disease	lobular hepatitis	13
lobular hepatitis	chronic biliary disease	12
chronic hepatitis	chronic biliary disease	9
chronic biliary disease	chronic hepatitis	6
chronic biliary disease		5
lobular hepatitis	chronic hepatitis	5
chronic hepatitis	lobular hepatitis	3
lobular hepatitis	Other (please specify in Comments)	3
Other (please specify in Comments)		3
lobular hepatitis	cholestasis, bilirubinostasis	1
		1
chronic hepatitis	chronic hepatitis	1
Other (please specify in Comments)	Other (please specify in Comments)	1
chronic hepatitis	not applicable	1
steatohepatitis	chronic hepatitis	1

Stages:	Popularity:
mild/early fibrosis without bridging	44.3%
fibrosis with bridging between vascular structures	20.6%
hepatocyte loss or bridging - favour collapse not fibrosis	19.6%
no fibrosis/equivocal fibrosis	7.2%
Other (please specify in Comments)	4.1%
not applicable / no special stains to assess architecture	2.1%
advanced fibrosis with bridging and nodularity/cirrhosis	2.1%

Diagnostic categories:	Popularity:

overlap syndrome	33.1%
autoimmune hepatitis	25.4%
primary biliary cholangitis	18.5%
acute / subacute hepatitis - autoimmune / drug / viral	12.3%
Other (please enter alternative diagnosis in comments box)	3.8%
drug induced liver injury (please specify in comments box)	2.3%
chronic cholangiopathy NOS	1.5%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	0.8%
manifestation of systemic or extrahepatic disease (please specify in comments box)	0.8%
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	0.8%
- histologically indeterminate for cause	0.8%

Diagnosis Combination:	**Count:**
overlap syndrome	28
autoimmune hepatitis	14
acute / subacute hepatitis - autoimmune / drug / viral	10
autoimmune hepatitis, primary biliary cholangitis	9
autoimmune hepatitis, overlap syndrome	7
primary biliary cholangitis	6
overlap syndrome, primary biliary cholangitis	5
acute / subacute hepatitis - autoimmune / drug / viral, primary biliary cholangitis	3
autoimmune hepatitis, drug induced liver injury (please specify in comments box)	2
Other (please enter alternative diagnosis in comments box)	2
Other (please enter alternative diagnosis in comments box), overlap syndrome	2
- histologically indeterminate for cause	1
acute / subacute hepatitis - autoimmune / drug / viral, Other (please enter alternative diagnosis in comments box)	1
acute / subacute hepatitis - autoimmune / drug / viral, overlap syndrome	1
acute / subacute hepatitis - autoimmune / drug / viral, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1
autoimmune hepatitis, chronic cholangiopathy NOS	1
chronic cholangiopathy NOS	1
drug induced liver injury (please specify in comments box)	1
manifestation of systemic or extrahepatic disease (please specify in comments box), primary biliary cholangitis	1
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	1

Original report and further information (if any): Primary biliary cholangitis. Possible PBC-AIH overlap given lab results and histology; no significant fibrosis; no evidence of lymphoma

Points of consensus from dropdowns menus:
Tumour:NA

Pattern: hepatitic alone either acute or chronic 46, hepatitic and biliary 44, = 90 as consensus for hepatitis +/- biliary. Biliary alone 5. Steatohepatitis and haemophagocytosis outliers?

Stage: no consensus, around 20% collapse not fibrosis but also 20% bridging fibrosis!

Diagnosis: overlap 56, just hepatitic diagnosis (AIH or DD) 29, i.e. no consensus for either overlap alone or AIH alone, combine for consensus. Just biliary disease PBC/cholangiopathy after accounting for comments =3.

Comments from members:
Quite a few requesting CK7 and/or orcein
Few considered EBV
Few would seek haematolymphoid opinion.

Complete answer for 10 marks would include: hepatitic pattern or diagnosis including AIH +/- biliary component or overlap.

*lose 5 those **just** giving a biliary pattern of injury/diagnosis n=3 – out of consensus for not recognising inflammatory component.*
Lose 5 for steatotic pattern of injury/diagnosis (consensus not reporting this) n=1? Not to score down with ref to case 1.

Case Number: L24_B11

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Male 64. Presented with painless jaundice, elevated ALT, ALP, and bilirubin. Viral serology negative. ANA 1/1280, other autoantibodies negative. Normal caeruloplasmin. Normal HFE genotype. Raised IgG. Cirrhotic appearing liver edge on US. At biopsy, ALT 1192, ALP 304, bilirubin 177.

Specimen: Native liver, needle biopsy

Macroscopic: Core

Immunohistochemistry: PSR

Original Diagnosis: Severe lymphoplasmacytic portal, interface and lobular hepatitis are in keeping with autoimmune hepatitis.

Tumour:	**Popularity:**
- No tumour/lesion present	95.9%

Tumour 1:	**Tumour 2:**	**Count:**
- No tumour/lesion present		90
		4
- No tumour/lesion present	- No tumour/lesion present	3

Pattern:	**Popularity:**
lobular hepatitis	77.3%
chronic hepatitis	21.6%
cholestasis, bilirubinostasis	18.6%
chronic biliary disease	8.2%
Other (please specify in Comments)	4.1%

acute venous outflow obstruction	1.0%

Pattern 1:	Pattern 2:	Count:
lobular hepatitis		49
lobular hepatitis	cholestasis, bilirubinostasis	10
chronic hepatitis		10
lobular hepatitis	chronic biliary disease	5
lobular hepatitis	chronic hepatitis	4
chronic hepatitis	lobular hepatitis	3
chronic hepatitis	cholestasis, bilirubinostasis	3
lobular hepatitis	Other (please specify in Comments)	2
cholestasis, bilirubinostasis		2
chronic biliary disease		2
		1
cholestasis, bilirubinostasis	chronic biliary disease	1
Other (please specify in Comments)		1
lobular hepatitis	acute venous outflow obstruction	1
Other (please specify in Comments)	Other (please specify in Comments)	1
cholestasis, bilirubinostasis	lobular hepatitis	1
cholestasis, bilirubinostasis	chronic hepatitis	1

Stages:	Popularity:
hepatocyte loss or bridging - favour collapse not fibrosis	43.3%
no fibrosis/equivocal fibrosis	27.8%
mild/early fibrosis without bridging	13.4%
fibrosis with bridging between vascular structures	6.2%
Other (please specify in Comments)	5.2%
advanced fibrosis with bridging and nodularity/cirrhosis	3.1%
not applicable / no special stains to assess architecture	1.0%

Diagnostic categories:	Popularity:
autoimmune hepatitis	41.7%
acute / subacute hepatitis - autoimmune / drug / viral	39.8%
Other (please enter alternative diagnosis in comments box)	5.6%
chronic cholangiopathy NOS	5.6%
overlap syndrome	2.8%
ascending cholangitis	0.9%
large bile duct obstruction	0.9%
- histologically indeterminate for cause	0.9%
primary biliary cholangitis	0.9%
primary sclerosing cholangitis	0.9%

Diagnosis Combination:	Count:
autoimmune hepatitis	39
acute / subacute hepatitis - autoimmune / drug / viral	36
chronic cholangiopathy NOS	4
acute / subacute hepatitis - autoimmune / drug / viral, autoimmune hepatitis	2
acute / subacute hepatitis - autoimmune / drug / viral, Other (please enter alternative diagnosis in comments box)	2
autoimmune hepatitis, Other (please enter alternative diagnosis in comments box)	2
Other (please enter alternative diagnosis in comments box)	2

[No selections made]	1
- histologically indeterminate for cause	1
acute / subacute hepatitis - autoimmune / drug / viral, ascending cholangitis	1
acute / subacute hepatitis - autoimmune / drug / viral, chronic cholangiopathy NOS	1
acute / subacute hepatitis - autoimmune / drug / viral, overlap syndrome	1
autoimmune hepatitis, chronic cholangiopathy NOS	1
autoimmune hepatitis, overlap syndrome	1
large bile duct obstruction, primary biliary cholangitis	1
overlap syndrome	1
primary sclerosing cholangitis	1

Original report and further information (if any): Severe lymphoplasmacytic portal, interface and lobular hepatitis are in keeping with autoimmune hepatitis.

Points of consensus from dropdowns menus:
Tumour: NA

Pattern: lobular hepatitis +/- cholestasis, 64. 21 chronic hepatitis either alone or in combination with lobular or cholestasis = 85 for consensus.

Stage: no consensus, favour collapse most popular, combined with no fibrosis 71.1%, add in mild fibrosis 84.5%? – committee agreed not to score on this.

Diagnosis:
AIH alone or with differentials viral and drug 79 = consensus from dropdowns but of these 1 selects chronic biliary pattern of injury and 5 consider a biliary component to some extent in comment.

Comments from members: Thick section, ask for more specials, ?Fe

Complete answer for 10 marks would include: recognition of a hepatitic pattern of injury and autoimmune hepatitis in differential for cause, not a strong enough consensus to score down those considering an additional biliary component/overlap.

*Lose 5 if **only** describing chronic biliary pattern injury and biliary differentials n=6 or give no differentials for cause n=1.*

Case Number: L24_B12

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Female 64. DBD liver transplant with split extneded right lobe graft for PSC with recurrent cholangitis. Left lobe and Hilar blocks included (reported at a time when our shikata stain was not working so not able to include)

Specimen: Liver explant

Macroscopic: Liver explant specimen showing scattered distended duct profiles, some of which contain calcified stones. No focal lesions identified. Some narrowing to the common bile duct to the point of bifurcation with dilatation of the right and left hepatic ducts.

Immunohistochemistry: None

Original Diagnosis: Well differentiated hilar cholangiocarcinoma with extensive perineural and lymphovascular invasion. pT2a.

Tumour:	Popularity:
cholangiocarcinoma	64.9%
- No tumour/lesion present	28.9%
focal nodular hyperplasia	1.0%
Other (please specify in Comments)	1.0%
biliary intra-epithelial neoplasia (BilIN)	1.0%
bile duct adenoma / peribiliary gland hamartoma	0.0%
leukaemia/lymphoma (please specify in Comments)	0.0%

Tumour 1:	Tumour 2:	Count:
cholangiocarcinoma		61
- No tumour/lesion present		27
		4
focal nodular hyperplasia		1
Other (please specify in Comments)		1
- No tumour/lesion present	- No tumour/lesion present	1
cholangiocarcinoma	biliary intra-epithelial neoplasia (BilIN)	1
cholangiocarcinoma	cholangiocarcinoma	1

Pattern:	Popularity:
chronic biliary disease	83.5%
cholestasis, bilirubinostasis	25.8%
Other (please specify in Comments)	7.2%
not applicable	1.0%

Pattern 1:	Pattern 2:	Count:
chronic biliary disease		61
chronic biliary disease	cholestasis, bilirubinostasis	12
cholestasis, bilirubinostasis	chronic biliary disease	6
Other (please specify in Comments)		5
cholestasis, bilirubinostasis		5
		4
chronic biliary disease	chronic biliary disease	1
cholestasis, bilirubinostasis	not applicable	1
cholestasis, bilirubinostasis	Other (please specify in Comments)	1
chronic biliary disease	Other (please specify in Comments)	1

Stages:	Popularity:
not applicable / no special stains to assess architecture	54.6%
mild/early fibrosis without bridging	23.7%
no fibrosis/equivocal fibrosis	7.2%
fibrosis with bridging between vascular structures	3.1%
Other (please specify in Comments)	2.1%

Diagnostic categories:	Popularity:
primary sclerosing cholangitis	67.0%

large bile duct obstruction	8.5%
Other (please enter alternative diagnosis in comments box)	8.5%
chronic cholangiopathy NOS	7.5%
hepatolithiasis	6.6%
ascending cholangitis	1.9%

Diagnosis Combination:	**Count:**
primary sclerosing cholangitis	60
chronic cholangiopathy NOS	7
Other (please enter alternative diagnosis in comments box)	6
[No selections made]	5
large bile duct obstruction, primary sclerosing cholangitis	4
hepatolithiasis, primary sclerosing cholangitis	3
large bile duct obstruction	3
ascending cholangitis, primary sclerosing cholangitis	2
hepatolithiasis	2
hepatolithiasis, large bile duct obstruction	2
Other (please enter alternative diagnosis in comments box), primary sclerosing cholangitis	2
chronic cholangiopathy NOS, Other (please enter alternative diagnosis in comments box)	1

Original report and further information (if any): Well differentiated hilar cholangiocarcinoma with extensive perineural and lymphovascular invasion. pT2a.

Points of consensus from dropdowns menus:
Tumour: CCA diagnosis does not reach consensus (63)

Pattern: 81 select chronic biliary disease +/- cholestasis

Stage: No consensus.

Diagnosis: 78 either select PSC or consider it in comments.

Comments from members: Few mention don't do Tx – not Tx pathology!

Complete answer for 10 marks would include; could strictly ask for PSC but inclined to score 10 anyone with biliary differential (lithiasis, LBDO, chronic cholangiopathy etc +/- chronic biliary disease pattern of injury – there is consensus for this, committee agree).

1 participant no response for this case
1 just FNH from dropdowns, comment; I do not see liver transplants. Characteristic map-like staining pattern of FNH with glutamine synthetase immunohistochemistry
Both will have to score 0

THIS CASE TO BE EXCLUDED FROM SCORING FOLLOWING A VOTE BY MEMBERS AT THE MEETING 5.12.24. NO CONSENSUS FOR THE PRIMARY DIAGNOSIS.

Case Number: L24_B13

Number of responses: 97. Date of analysis: 30 Oct 2024

Clinical: Male 67. Liver and lung lesions identified on imaging studies. The two liver lesions comprise a 4.8cm lobulated partly exophytic lesion in segment III and a further 3cm subcapsular lesion in segment II/IV. Background liver appears cirrhotic on imaging. History of heavy alcohol use. Splenectomy in 1990. Biopsy of left lobe lesion. ? Nature.

Specimen: Liver biopsy

Macroscopic: Three tan cores 10mm, 7mm and 5mm and one haemorrhagic core 16mm.

Immunohistochemistry: CD31, ERG, CD68 PG-M1, CD8

Original Diagnosis: Splenosis

Tumour:	Popularity:
Other (please specify in Comments)	52.6%
angiosarcoma	5.2%
epithelioid haemangioendothelioma	4.1%
inflammatory pseudotumour	1.0%
leukaemia/lymphoma (please specify in Comments)	1.0%
- No tumour/lesion present	1.0%
hepatocellular lesion, well differentiated NOS (please add comment)	1.0%
hepatocellular carcinoma	1.0%
haemangioma NOS	1.0%
metastasis (further comment in Comments)	0.0%

Tumour 1:	Tumour 2:	Count:
Other (please specify in Comments)		50
		32
angiosarcoma		4
epithelioid haemangioendothelioma		4
haemangioma NOS		1
hepatocellular lesion, well differentiated NOS (please add comment)		1
inflammatory pseudotumour		1
leukaemia/lymphoma (please specify in Comments)		1
- No tumour/lesion present		1
hepatocellular carcinoma	angiosarcoma	1
Other (please specify in Comments)	Other (please specify in Comments)	1

Pattern:	Popularity:
within normal limits	16.5%
steatosis	12.4%
Other (please specify in Comments)	9.3%
not applicable	7.2%
vascular disease	2.1%
cholestasis, bilirubinostasis	1.0%

Pattern 1:	Pattern 2:	Count:
		52
within normal limits		16
steatosis		10

Other (please specify in Comments)		9
not applicable		6
cholestasis, bilirubinostasis	cholestasis, bilirubinostasis	1
not applicable	not applicable	1
vascular disease	steatosis	1
steatosis	vascular disease	1

Stages:	**Popularity:**
not applicable / no special stains to assess architecture	32.0%
no fibrosis/equivocal fibrosis	11.3%
subtle architectural abnormalities, vascular disease	1.0%
Other (please specify in Comments)	1.0%

Diagnostic categories:	**Popularity:**
Other (please enter alternative diagnosis in comments box)	46.9%
- no evidence of diffuse/background liver disease	34.4%
steatotic liver disease - alcohol related liver disease	9.4%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	6.3%
manifestation of systemic or extrahepatic disease (please specify in comments box)	3.1%

Diagnosis Combination:	**Count:**
[No selections made]	65
Other (please enter alternative diagnosis in comments box)	15
- no evidence of diffuse/background liver disease	11
steatotic liver disease - alcohol related liver disease	3
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	2
manifestation of systemic or extrahepatic disease (please specify in comments box)	1

Original report and further information (if any): Splenosis

Version: 1.20