UK National Liver Histopathology EQA Scheme

Circulation L25_B

Case Response Analysis

This document gives information on individual cases in circulation L25_B of this scheme. It contains no personal details of participants.

Case Number: L25_B1

Number of responses: 110 (88 for consensus). Date of analysis: 29 Oct 2025

Clinical: Female 66. Hereditary haemochromatosis. For hepatic Iron overload/fibrosis.

Specimen: Liver needle core biopsy

Macroscopic: 2 cores of yellow and brown tissue longest measuring 15 mm in length plus fragment.

Immunohistochemistry: Perls, Massons trichrome, Orcein

Tumour:	Popularity:
- No tumour/lesion present	100.0%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		102
- No tumour/lesion present	- No tumour/lesion present	8

Pattern:	Popularity:
iron overload	92.7%
steatosis	62.7%
steatohepatitis	36.4%

Pattern 1:	Pattern 2:	Count:
steatosis	iron overload	38
steatohepatitis	iron overload	32
iron overload	steatosis	26
iron overload	steatohepatitis	6
steatosis		5
steatohepatitis		2
		1

Stages:	Popularity:
no fibrosis/equivocal fibrosis	78.2%
mild/early fibrosis without bridging	21.8%

Diagnostic categories:	Popularity:
iron overload, hereditary	50.9%

steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	41.1%
steatotic liver disease - metabolic dysfunction associated MASLD	7.0%
iron overload - acquired, secondary	0.5%
manifestation of systemic or extrahepatic disease (please specify in comments box)	0.5%

Diagnosis Combination:	**Count:**
iron overload, hereditary, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	88
iron overload, hereditary, steatotic liver disease - metabolic dysfunction associated MASLD	14
iron overload, hereditary	5
iron overload - acquired, secondary, iron overload, hereditary	1
iron overload, hereditary, manifestation of systemic or extrahepatic disease (please specify in comments box)	1
steatotic liver disease - metabolic dysfunction associated MASLD	1

Original report and further information (if any): The features are of liver siderosis (Grade 2 on Perls) and steatosis. There is no evidence of steatohepatitis. There is mild pericellular fibrosis and mild portal expansion but no bridging or cirrhosis. The findings would be in keeping with the clinical history of haemachromatosis, however, iron deposition can also occur in the setting of fatty liver disease. It is not possible to distinguish between the two on histology but given the history, haemachromatosis would be favoured as the underlying cause.

Case 1:
Points of consensus from dropdowns menus:
*Pattern: consensus for iron overload **and** steatosis/steatohepatitis.*
Stage: consensus for no/equivocal/mild
*Diagnosis: consensus for both Fe overload hereditary **AND** steatotic liver disease*

*Complete answer for 10 marks would include: reference to both steatosis **and** iron overload somewhere in the response **and** no/mild fibrosis (everyone scores 10!).*

Case Number: L25_B2

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Female 60. Liver segment 3 lesion. Multinodular liver ? chronic liver disease ? malignant. Further clinical information from patient's notes: Thoracic and upper abdominal lymphadenopathy, hepatosplenomegaly and multiple hepatic and splenic lesions on recent CT.

Specimen: Liver core biopsy

Macroscopic: Three white/brown coloured core biopsy/s largest dimension measures 19mm in length.

Immunohistochemistry: Retic, Victoria blue, Zn

Tumour:	**Popularity:**
- No tumour/lesion present	82.7%
Other (please specify in Comments)	16.4%
inflammatory pseudotumour	0.9%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		86
Other (please specify in Comments)		18
- No tumour/lesion present	- No tumour/lesion present	5
inflammatory pseudotumour		1

Pattern:	Popularity:
granulomatous	91.8%
steatosis	76.4%
steatohepatitis	3.6%
not applicable	1.8%
abnormal, no pattern discernible	0.9%
Other (please specify in Comments)	0.9%
chronic hepatitis	0.9%

Pattern 1:	Pattern 2:	Count:
granulomatous	steatosis	73
granulomatous		17
steatosis	granulomatous	6
steatosis		4
granulomatous	steatohepatitis	4
Other (please specify in Comments)	steatosis	1
granulomatous	chronic hepatitis	1
not applicable	not applicable	1
not applicable		1
		1
abnormal, no pattern discernible		1

Stages:	Popularity:
mild/early fibrosis without bridging	29.1%
no fibrosis/equivocal fibrosis	25.5%
not applicable / no special stains to assess architecture	16.4%
Other (please specify in Comments)	13.6%
hepatocyte loss or bridging - favour collapse not fibrosis	6.4%
fibrosis with bridging between vascular structures	5.5%
advanced fibrosis with bridging and nodularity/cirrhosis	0.9%
subtle architectural abnormalities, vascular disease	0.9%

Diagnostic categories:	Popularity:
granulomatous disease NOS (please specify in comments box)	41.3%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	33.5%
sarcoidosis	16.8%
steatotic liver disease - metabolic dysfunction associated MASLD	3.4%
manifestation of systemic or extrahepatic disease (please specify in comments box)	3.4%
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	1.1%
Other (please enter alternative diagnosis in comments box)	0.6%

Diagnosis Combination:	Count:

granulomatous disease NOS (please specify in comments box), steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	41
granulomatous disease NOS (please specify in comments box)	29
sarcoidosis, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	15
sarcoidosis	7
sarcoidosis, steatotic liver disease - metabolic dysfunction associated MASLD	4
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	3
granulomatous disease NOS (please specify in comments box), sarcoidosis	2
granulomatous disease NOS (please specify in comments box), steatotic liver disease - metabolic dysfunction associated MASLD	2
manifestation of systemic or extrahepatic disease (please specify in comments box), sarcoidosis	2
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	2
manifestation of systemic or extrahepatic disease (please specify in comments box)	1
Other (please enter alternative diagnosis in comments box)	1
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1

Original report and further information (if any): Granulomatous process with background moderate simple steatosis. The granulomatous process is most likely to represent sarcoidosis in view of morphology and clinical information. Definitive exclusion of infection (e.g. TB) requires clinical correlation. No formal fibrous stage given.

Case 2: Points of consensus from dropdowns menus:

Tumour: 1 inflam pseudotumour, 18 ‘other’ (was sent as lesional bx)

Pattern: granulomatous **and** steatosis/SH not quite consensus, add granulomatous alone does reach consensus.

Stage: no consensus

Diagnosis: combine granulomatous disease NOS or sarcoidosis +/- steatosis for consensus. All manifestation systemic disease/other/steatotic liver disease alone have granulomas in text. 25 responders do not mention sarcoid anywhere in response, many favouring infectious, not quite consensus to score (85 consider sarcoid).

Complete answer for 10 marks would include: granulomatous disease/sarcoidosis somewhere in the response +/- steatosis. *All score 10!*

Handful thought there might be +ZN, many comments hard to assess digitally. Handful ‘necrotising’.

Case Number: L25_B3

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Female 53. colorectal liver met

Specimen: Liver resection, section of lesion.

Macroscopic: 44g segment 3 non anatomical resection, 9mm yellow lesion.

Immunohistochemistry: LFABP immunohistochemistry

Tumour:	Popularity:
hepatocellular adenoma HNFalpha1 inactivated	91.8%
hepatocellular adenoma NOS	3.6%
Other (please specify in Comments)	3.6%
focal nodular hyperplasia	2.7%
hepatocellular lesion, well differentiated NOS (please add comment)	0.9%

Tumour 1:	Tumour 2:	Count:
hepatocellular adenoma HNFalpha1 inactivated		97
Other (please specify in Comments)		3
hepatocellular adenoma HNFalpha1 inactivated	hepatocellular adenoma HNFalpha1 inactivated	2
hepatocellular adenoma NOS		2
focal nodular hyperplasia		2
hepatocellular lesion, well differentiated NOS (please add comment)		1
hepatocellular adenoma NOS	hepatocellular adenoma HNFalpha1 inactivated	1
Other (please specify in Comments)	hepatocellular adenoma HNFalpha1 inactivated	1
focal nodular hyperplasia	hepatocellular adenoma NOS	1

Pattern:	Popularity:
within normal limits	79.1%
Other (please specify in Comments)	9.1%
not applicable	8.2%
cholestasis, bilirubinostasis	0.9%

Pattern 1:	Pattern 2:	Count:
within normal limits		85
Other (please specify in Comments)		9
not applicable		6
		5
cholestasis, bilirubinostasis		1
not applicable	not applicable	1
Other (please specify in Comments)	not applicable	1
within normal limits	not applicable	1
within normal limits	within normal limits	1

Stages:	Popularity:
not applicable / no special stains to assess architecture	58.2%
no fibrosis/equivocal fibrosis	31.8%
subtle architectural abnormalities, vascular disease	0.9%

Diagnostic categories:	Popularity:
- no evidence of diffuse/background liver disease	82.1%
Other (please enter alternative diagnosis in comments box)	16.4%
- not applicable (insufficient non-lesional tissue)	1.5%

Diagnosis Combination:	Count:

- no evidence of diffuse/background liver disease	53
[No selections made]	45
Other (please enter alternative diagnosis in comments box)	9
- no evidence of diffuse/background liver disease, Other (please enter alternative diagnosis in comments box)	2
- not applicable (insufficient non-lesional tissue)	1

Original report and further information (if any): HNF1alpha inactivated hepatocellular adenoma

Case 3: Points of consensus from dropdowns menus:
Tumour: strong consensus 101 for HNF1a inactivated hepatocellular adenoma. No malignant diagnoses.
Pattern(re background): within normal limits 87 (88 for consensus!, 2 selecting 'other' have normal in text, some considering NRH in text)
Diagnosis (re background): >80% making a selection choose no evidence of background liver disease but 45 make no selection. Only 7 responses make no reference to the background liver somewhere in the response, not even stage, 103 do.

Complete answer for 10 marks would include: HNF1alpha inactivated hepatocellular adenoma
***And** a comment on the background liver (vote in favour at meeting 4.12.25)*

If HNF1alpha inactivated hepatocellular adenoma not considered lose 5 (n=4 FNH or adenoma NOS)
No comment on background liver lose 5 (n=7) 1 response both missing lose 10

Case Number: L25_B4

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Female 53. Increased LFT (cholestatic). Further information from electronic patient records: Patient has recently been treated for colorectal cancer with chemotherapy agents, including oxaliplatin

Specimen: Liver core biopsy

Macroscopic: A friable cream and 10 core measuring 30 mm

Immunohistochemistry: Picrosirius Red, Reticulin

Tumour:	**Popularity:**
- No tumour/lesion present	97.3%
focal nodular hyperplasia	0.9%
Other (please specify in Comments)	0.0%

Tumour 1:	**Tumour 2:**	**Count:**
- No tumour/lesion present		103
- No tumour/lesion present	- No tumour/lesion present	4
		2
focal nodular hyperplasia		1

Pattern:	**Popularity:**
vascular disease	70.0%

Other (please specify in Comments)	24.5%
cholestasis, bilirubinostasis	15.5%
steatosis	11.8%
lobular hepatitis	4.5%
not applicable	2.7%
acute venous outflow obstruction	2.7%
abnormal, no pattern discernible	1.8%
chronic biliary disease	0.9%
granulomatous	0.9%

Pattern 1:	Pattern 2:	Count:
vascular disease		42
Other (please specify in Comments)		15
vascular disease	steatosis	11
vascular disease	Other (please specify in Comments)	6
cholestasis, bilirubinostasis	vascular disease	5
vascular disease	cholestasis, bilirubinostasis	4
cholestasis, bilirubinostasis		4
acute venous outflow obstruction		3
Other (please specify in Comments)	vascular disease	3
lobular hepatitis		2
vascular disease	lobular hepatitis	2
vascular disease	not applicable	2
cholestasis, bilirubinostasis	Other (please specify in Comments)	2
cholestasis, bilirubinostasis	steatosis	1
Other (please specify in Comments)	steatosis	1
lobular hepatitis	cholestasis, bilirubinostasis	1
not applicable		1
granulomatous		1
		1
abnormal, no pattern discernible		1
chronic biliary disease	vascular disease	1
abnormal, no pattern discernible	vascular disease	1

Stages:	Popularity:
subtle architectural abnormalities, vascular disease	42.7%
no fibrosis/equivocal fibrosis	30.0%
mild/early fibrosis without bridging	19.1%
fibrosis with bridging between vascular structures	2.7%
Other (please specify in Comments)	2.7%
hepatocyte loss or bridging - favour collapse not fibrosis	1.8%

Diagnostic categories:	Popularity:
drug induced liver injury (please specify in comments box)	65.5%
Other (please enter alternative diagnosis in comments box)	26.9%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	2.5%
acute / subacute hepatitis - autoimmune / drug / viral	1.7%
- histologically indeterminate for cause	0.8%
manifestation of systemic or extrahepatic disease (please specify in comments box)	0.8%

- no evidence of diffuse/background liver disease	0.8%
steatotic liver disease - metabolic dysfunction associated MASLD	0.8%

Diagnosis Combination:	**Count:**
drug induced liver injury (please specify in comments box)	67
Other (please enter alternative diagnosis in comments box)	24
drug induced liver injury (please specify in comments box), Other (please enter alternative diagnosis in comments box)	7
[No selections made]	3
drug induced liver injury (please specify in comments box), steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	3
- histologically indeterminate for cause	1
- no evidence of diffuse/background liver disease	1
acute / subacute hepatitis - autoimmune / drug / viral	1
acute / subacute hepatitis - autoimmune / drug / viral, Other (please enter alternative diagnosis in comments box)	1
drug induced liver injury (please specify in comments box), steatotic liver disease - metabolic dysfunction associated MASLD	1
manifestation of systemic or extrahepatic disease (please specify in comments box)	1

Original report and further information (if any): Nodular regenerative hyperplasia and focal perisinusoidal fibrosis most likely secondary to oxaliplatin therapy. Oxaliplatin is a well-recognised cause of liver injury, frequently inducing sinusoidal obstruction syndrome and nodular regenerative hyperplasia.

Case 4: Points of consensus from dropdowns menus:
Tumour: 1 FNH.
Pattern: 55 vascular disease +23 vascular disease and another pattern = 78, of those not selecting vascular disease 15 have NRH (or PSVD) in text = 93. 3 acute venous outflow obstruction (not really?!)
Stage: no consensus
Diagnosis: 78 select DILI alone or in combination, 16 not selecting DILI have oxaliplatin in comments = 94, few more 'chemotherapy'

Complete answer for 10 marks would include: description of a vascular pattern of injury (being generous to include dilated sinusoids acute venous outflow obstruction, it is a great example of NRH!) ***and*** *DILI*

If either missing lose 5 for each. Person selecting FNH chooses a vascular pattern of injury and DILI, have NRH in text, lose 5.

Case Number: L25_B5

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Female 58. 58F ultrasound performed in community for abdo pain - indeterminate liver lesion. MRI has shown increase in this 24mm segment 8 lesion. LFTs and tumour markers normal. No features of chronic liver disease, cirrhosis or portal hypertension.

Specimen: Liver biopsy

Macroscopic: two tan brown cores measuring 20 and 17mm.

Immunohistochemistry: N/A

Tumour:	Popularity:
leukaemia/lymphoma (please specify in Comments)	86.4%
Other (please specify in Comments)	13.6%
metastasis (further comment in Comments)	1.8%
- No tumour/lesion present	0.9%
inflammatory pseudotumour	0.0%

Tumour 1:	Tumour 2:	Count:
leukaemia/lymphoma (please specify in Comments)		90
Other (please specify in Comments)		13
leukaemia/lymphoma (please specify in Comments)	leukaemia/lymphoma (please specify in Comments)	2
leukaemia/lymphoma (please specify in Comments)	Other (please specify in Comments)	2
- No tumour/lesion present		1
leukaemia/lymphoma (please specify in Comments)	metastasis (further comment in Comments)	1
metastasis (further comment in Comments)		1

Pattern:	Popularity:
not applicable	37.3%
within normal limits	26.4%
steatosis	23.6%
cholestasis, bilirubinostasis	2.7%
Other (please specify in Comments)	2.7%
abnormal, no pattern discernible	0.9%

Pattern 1:	Pattern 2:	Count:
not applicable		35
within normal limits		27
steatosis		23
		12
Other (please specify in Comments)		3
not applicable	not applicable	3
steatosis	not applicable	1
cholestasis, bilirubinostasis	steatosis	1
within normal limits	steatosis	1
not applicable	within normal limits	1
abnormal, no pattern discernible		1
cholestasis, bilirubinostasis		1
cholestasis, bilirubinostasis	not applicable	1

Stages:	Popularity:
not applicable / no special stains to assess architecture	79.1%
no fibrosis/equivocal fibrosis	10.0%

Diagnostic categories:	Popularity:
- no evidence of diffuse/background liver disease	27.9%
Other (please enter alternative diagnosis in comments box)	25.0%

- not applicable (insufficient non-lesional tissue)	20.6%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	13.2%
manifestation of systemic or extrahepatic disease (please specify in comments box)	11.8%
- histologically indeterminate for cause	1.5%

Diagnosis Combination:	**Count:**
[No selections made]	45
- no evidence of diffuse/background liver disease	18
Other (please enter alternative diagnosis in comments box)	15
- not applicable (insufficient non-lesional tissue)	14
manifestation of systemic or extrahepatic disease (please specify in comments box)	7
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	7
- histologically indeterminate for cause	1
- no evidence of diffuse/background liver disease, Other (please enter alternative diagnosis in comments box)	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
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): low grade B cell lymphoma

Case 5: Points of consensus from dropdowns menus: Lymphoma/ lymphoproliferative / need IHC

Complete answer for 10 marks would include: Lymphoma/ lymphoproliferative / need IHC

If favour benign but IHC – score 10

If benign and IHC missing from response/no consideration of differential lose 10

Case Number: L25_B6

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Male 25. Liver cyst

Specimen: Liver resection

Macroscopic: Liver resection 42 x 37 x 70mm containing a 29 x 18 x 15mm uniloculated cyst

Immunohistochemistry: N/A

Tumour:	**Popularity:**
cyst (non-neoplastic)	96.4%
Other (please specify in Comments)	5.5%

Tumour 1:	Tumour 2:	Count:
cyst (non-neoplastic)		102
Other (please specify in Comments)		4
cyst (non-neoplastic)	cyst (non-neoplastic)	2
Other (please specify in Comments)	cyst (non-neoplastic)	1
cyst (non-neoplastic)	Other (please specify in Comments)	1

Pattern:	Popularity:
within normal limits	73.6%
not applicable	10.9%
Other (please specify in Comments)	7.3%
cholestasis, bilirubinostasis	0.9%
vascular disease	0.9%

Pattern 1:	Pattern 2:	Count:
within normal limits		81
		9
not applicable		9
Other (please specify in Comments)		6
not applicable	not applicable	2
Other (please specify in Comments)	not applicable	1
cholestasis, bilirubinostasis	Other (please specify in Comments)	1
vascular disease		1

Stages:	Popularity:
not applicable / no special stains to assess architecture	56.4%
no fibrosis/equivocal fibrosis	30.0%
Other (please specify in Comments)	1.8%

Diagnostic categories:	Popularity:
- no evidence of diffuse/background liver disease	65.2%
Other (please enter alternative diagnosis in comments box)	30.3%
- not applicable (insufficient non-lesional tissue)	3.0%
ductal plate malformation/polycystic liver disease/congenital hepatic fibrosis	1.5%

Diagnosis Combination:	Count:
[No selections made]	45
- no evidence of diffuse/background liver disease	42
Other (please enter alternative diagnosis in comments box)	19
- not applicable (insufficient non-lesional tissue)	2
- no evidence of diffuse/background liver disease, Other (please enter alternative diagnosis in comments box)	1
ductal plate malformation/polycystic liver disease/congenital hepatic fibrosis	1

Original report and further information (if any): benign ciliated hepatic foregut cyst

Case 6: Points of consensus from dropdowns menus:

Tumour: Benign ciliated foregut cyst

Complete answer for 10 marks would include: Benign ciliated foregut cyst/ benign simple cyst/ non neoplastic cyst

If diagnosis of biliary cystadenoma lose 5 marks

Case Number: L25_B7

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Female 37. Acute hepatitis ?cause. ALT up to 1000, now reducing. All serology negative. Possibly autoimmune but from Zambia ?exotic infection. Liver screen negative. PMH HTN previous IVDU, ETOH excess.

Specimen: Liver core biopsy

Macroscopic: Two cores of tan tissue which measure 11mm, 12mm with accompanying fragment measuring 3mm.

Immunohistochemistry: Van gieson, Victoria blue

Tumour:	Popularity:
- No tumour/lesion present	97.3%
Other (please specify in Comments)	0.9%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		104
- No tumour/lesion present	- No tumour/lesion present	3
		2
Other (please specify in Comments)	Other (please specify in Comments)	1

Pattern:	Popularity:
steatohepatitis	75.5%
lobular hepatitis	26.4%
cholestasis, bilirubinostasis	18.2%
steatosis	6.4%
Other (please specify in Comments)	2.7%
not applicable	1.8%
chronic biliary disease	0.9%
abnormal, no pattern discernible	0.9%
chronic hepatitis	0.9%

Pattern 1:	Pattern 2:	Count:
steatohepatitis		54
steatohepatitis	cholestasis, bilirubinostasis	15
lobular hepatitis		9
lobular hepatitis	steatohepatitis	5
lobular hepatitis	steatosis	5
steatohepatitis	lobular hepatitis	4

lobular hepatitis	cholestasis, bilirubinostasis	4
		3
steatohepatitis	not applicable	2
steatohepatitis	Other (please specify in Comments)	1
cholestasis, bilirubinostasis	steatohepatitis	1
Other (please specify in Comments)	steatosis	1
Other (please specify in Comments)	steatohepatitis	1
abnormal, no pattern discernible		1
chronic hepatitis		1
steatosis		1
lobular hepatitis	chronic biliary disease	1
lobular hepatitis	lobular hepatitis	1

Stages:	**Popularity:**
hepatocyte loss or bridging - favour collapse not fibrosis	34.5%
advanced fibrosis with bridging and nodularity/cirrhosis	20.0%
no fibrosis/equivocal fibrosis	18.2%
mild/early fibrosis without bridging	11.8%
Other (please specify in Comments)	7.3%
fibrosis with bridging between vascular structures	6.4%

Diagnostic categories:	**Popularity:**
steatotic liver disease - alcohol related liver disease	53.2%
acute / subacute hepatitis - autoimmune / drug / viral	20.2%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	16.1%
Other (please enter alternative diagnosis in comments box)	5.6%
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	1.6%
autoimmune hepatitis	1.6%
drug induced liver injury (please specify in comments box)	1.6%

Diagnosis Combination:	**Count:**
steatotic liver disease - alcohol related liver disease	55
acute / subacute hepatitis - autoimmune / drug / viral	13
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	13
acute / subacute hepatitis - autoimmune / drug / viral, steatotic liver disease - alcohol related liver disease	5
acute / subacute hepatitis - autoimmune / drug / viral, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	5
[No selections made]	4
Other (please enter alternative diagnosis in comments box)	4
drug induced liver injury (please specify in comments box), steatotic liver disease - alcohol related liver disease	2
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	2
Other (please enter alternative diagnosis in comments box), steatotic liver disease - alcohol related liver disease	2
steatotic liver disease - alcohol related liver disease, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	2
acute / subacute hepatitis - autoimmune / drug / viral, autoimmune hepatitis	1
acute / subacute hepatitis - autoimmune / drug / viral, Other (please enter alternative diagnosis in comments box)	1
autoimmune hepatitis	1

- **Original report and further information (if any):** Florid (acute) steatohepatitis with phlebosclerosis; the features amount to those previously described as (received from submitter subsequently) **'central sclerosing hyaline necrosis.'** This pattern of injury is almost exclusively seen in alcohol-related liver disease. We note the history of small bowel disease; another (much less likely) cause could be small bowel overgrowth. There is no evidence of any form of acute immune-driven hepatitis.

Case 7: Points of consensus from dropdowns menus:

Pattern: consensus for either steatohepatitis / steatosis
Stage: No consensus for stage

Complete answer for 10 marks would include: steatohepatitis / steatosis /ALD

If recognise acute lobular hepatitis but missing steatosis/ steatohepatitis missing from response lose 5 (13 people)

Problems : ? lose 5

1 person said chronic and subacute

1 person said chronic biliary and sub acute

1 person lobular hepatitis , AIH

Committee feel difficult to score – ask members to vote whether to include this case – as above (i.e. need to describe steatotic liver disease and/or its causes to score full marks) or exclude from scoring.

At the meeting case excluded from scoring. Point made at meeting that this is an example of steatohepatitis with features as described in alcohol related injury.

Case Number: L25_B8

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Female 77. Hepatitis A persistent high LFTs

Specimen: Liver biopsy

Macroscopic: Liver core

Immunohistochemistry: H&E and EPSR

Tumour:	**Popularity:**
- No tumour/lesion present	98.2%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		104
- No tumour/lesion present	- No tumour/lesion present	4
		2

Pattern:	Popularity:
cholestasis, bilirubinostasis	92.7%
lobular hepatitis	40.9%
chronic hepatitis	10.0%
Other (please specify in Comments)	9.1%
chronic biliary disease	5.5%
steatohepatitis	1.8%
steatosis	0.9%

Pattern 1:	Pattern 2:	Count:
cholestasis, bilirubinostasis		34
cholestasis, bilirubinostasis	lobular hepatitis	31
lobular hepatitis	cholestasis, bilirubinostasis	12
cholestasis, bilirubinostasis	Other (please specify in Comments)	7
cholestasis, bilirubinostasis	chronic hepatitis	7
cholestasis, bilirubinostasis	chronic biliary disease	4
chronic biliary disease	cholestasis, bilirubinostasis	2
chronic hepatitis	cholestasis, bilirubinostasis	2
Other (please specify in Comments)		2
		2
lobular hepatitis	Other (please specify in Comments)	1
cholestasis, bilirubinostasis	steatohepatitis	1
chronic hepatitis	steatohepatitis	1
cholestasis, bilirubinostasis	steatosis	1
cholestasis, bilirubinostasis	cholestasis, bilirubinostasis	1
chronic hepatitis		1
lobular hepatitis		1

Stages:	Popularity:
fibrosis with bridging between vascular structures	49.1%
mild/early fibrosis without bridging	30.9%
no fibrosis/equivocal fibrosis	7.3%
advanced fibrosis with bridging and nodularity/cirrhosis	4.5%
hepatocyte loss or bridging - favour collapse not fibrosis	4.5%
Other (please specify in Comments)	1.8%

Diagnostic categories:	Popularity:
acute / subacute hepatitis - autoimmune / drug / viral	44.8%
Other (please enter alternative diagnosis in comments box)	20.0%
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box)	14.4%
drug induced liver injury (please specify in comments box)	5.6%
chronic cholangiopathy NOS	4.0%
large bile duct obstruction	4.0%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1.6%

- histologically indeterminate for cause	1.6%
autoimmune hepatitis	1.6%
ascending cholangitis	1.6%
manifestation of systemic or extrahepatic disease (please specify in comments box)	0.8%

Diagnosis Combination:	**Count:**
acute / subacute hepatitis - autoimmune / drug / viral	44
Other (please enter alternative diagnosis in comments box)	19
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box)	15
acute / subacute hepatitis - autoimmune / drug / viral, Other (please enter alternative diagnosis in comments box)	5
chronic cholangiopathy NOS	3
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box), drug induced liver injury (please specify in comments box)	3
drug induced liver injury (please specify in comments box)	3
[No selections made]	2
- histologically indeterminate for cause	2
acute / subacute hepatitis - autoimmune / drug / viral, chronic cholangiopathy NOS	2
acute / subacute hepatitis - autoimmune / drug / viral, large bile duct obstruction	2
acute / subacute hepatitis - autoimmune / drug / viral, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	2
autoimmune hepatitis	2
large bile duct obstruction	2
acute / subacute hepatitis - autoimmune / drug / viral, ascending cholangitis	1
ascending cholangitis, Other (please enter alternative diagnosis in comments box)	1
drug induced liver injury (please specify in comments box), large bile duct obstruction	1
manifestation of systemic or extrahepatic disease (please specify in comments box)	1

Original report and further information (if any): Cholestatic hepatitis with mild fibrosis; whilst not entirely specific the pattern is described in association with hepatitis A including including prominent biliary features mimicking obstruction and this is the most likely cause in this case

Case 8: *Points of consensus from dropdowns menus:*

Pattern: cholestasis, bilirubinostasis (only 5 did not say this,1 no response at all)

Stage: no consensus

Diagnosis: no consensus

Complete answer for 10 marks would include:) cholestasis, bilirubinostasis

If cholestasis missing from response lose 5

Case Number: L25_B9

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Male 46. 46M liver lesion resection

Specimen: Liver resection

Macroscopic: Liver resection 160 x 150 x 45mm containing a 126 x 102 x 30mm lesion. One representative section provided that includes interface with background.

Immunohistochemistry: N/A

Tumour:	Popularity:
haemangioma NOS	96.4%
Other (please specify in Comments)	1.8%
hepatocellular adenoma inflammatory	0.9%
angiomyolipoma	0.9%
epithelioid haemangioendothelioma	0.0%

Tumour 1:	Tumour 2:	Count:
haemangioma NOS		103
haemangioma NOS	haemangioma NOS	2
haemangioma NOS	Other (please specify in Comments)	1
hepatocellular adenoma inflammatory		1
Other (please specify in Comments)		1
		1
angiomyolipoma		1

Pattern:	Popularity:
within normal limits	44.5%
Other (please specify in Comments)	21.8%
not applicable	20.9%
abnormal, no pattern discernible	1.8%
vascular disease	0.9%
cholestasis, bilirubinostasis	0.9%
chronic biliary disease	0.9%

Pattern 1:	Pattern 2:	Count:
within normal limits		49
Other (please specify in Comments)		24
not applicable		20
		9
not applicable	not applicable	3
abnormal, no pattern discernible		2
cholestasis, bilirubinostasis		1
chronic biliary disease		1
vascular disease		1

Stages:	Popularity:
not applicable / no special stains to assess architecture	69.1%
no fibrosis/equivocal fibrosis	13.6%
mild/early fibrosis without bridging	3.6%
subtle architectural abnormalities, vascular disease	0.9%

Diagnostic categories:	Popularity:
- no evidence of diffuse/background liver disease	62.1%
- not applicable (insufficient non-lesional tissue)	17.2%
Other (please enter alternative diagnosis in comments box)	15.5%

- histologically indeterminate for cause	3.4%
primary sclerosing cholangitis	1.7%

Diagnosis Combination:	Count:
[No selections made]	52
- no evidence of diffuse/background liver disease	36
- not applicable (insufficient non-lesional tissue)	10
Other (please enter alternative diagnosis in comments box)	9
- histologically indeterminate for cause	2
primary sclerosing cholangitis	1

Original report and further information (if any): benign cavernous haemangioma

Points of consensus from dropdowns menus:
Tumour: consensus for haemangioma

No clear consensus for background liver (Stage: Majority went with NA/No fibrosis (82.7%)
Diagnosis: No evidence of diffuse/background liver disease or NA (62.1%) not much in the section and perilesional) – at the meeting members voted to say response should not mandate a comment on background liver.

Complete answer for 10 marks would include: haemangioma

If haemangioma considered in a differential lose 5
If only diagnosis of another entity (AML adenoma AVM) lose 10

Case Number: L25_B10

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Female 48. Pyrexia unknown origin, intermittent fever approximately six weeks. Bilateral lung infiltrate. Large liver, some history of alcohol excess. Unclear aetiology ?cirrhosis, ?infection, ??TB.

Specimen: Liver core biopsy

Macroscopic: A core of cream tissue which measures 27mm in length.

Immunohistochemistry: Van gieson, Retic, Glutamine synthetase

Tumour:	Popularity:
- No tumour/lesion present	95.5%
focal nodular hyperplasia	2.7%
hepatocellular carcinoma	0.0%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		102
- No tumour/lesion present	- No tumour/lesion present	3
focal nodular hyperplasia		2

		2
focal nodular hyperplasia	focal nodular hyperplasia	1

Pattern:	Popularity:
steatohepatitis	62.7%
steatosis	24.5%
chronic hepatitis	7.3%
Other (please specify in Comments)	7.3%
lobular hepatitis	6.4%
chronic biliary disease	3.6%
abnormal, no pattern discernible	1.8%
vascular disease	1.8%
cholestasis, bilirubinostasis	0.9%

Pattern 1:	Pattern 2:	Count:
steatohepatitis		55
steatosis		18
		5
chronic hepatitis		4
steatohepatitis	Other (please specify in Comments)	3
steatohepatitis	lobular hepatitis	2
steatosis	lobular hepatitis	2
Other (please specify in Comments)		2
abnormal, no pattern discernible		2
vascular disease	steatohepatitis	2
lobular hepatitis	steatosis	2
steatohepatitis	steatosis	2
Other (please specify in Comments)	steatosis	1
chronic hepatitis	steatosis	1
Other (please specify in Comments)	Other (please specify in Comments)	1
chronic biliary disease	steatohepatitis	1
Other (please specify in Comments)	steatohepatitis	1
steatohepatitis	cholestasis, bilirubinostasis	1
steatohepatitis	chronic biliary disease	1
chronic biliary disease	chronic hepatitis	1
steatohepatitis	chronic hepatitis	1
steatosis	chronic hepatitis	1
chronic biliary disease	lobular hepatitis	1

Stages:	Popularity:
advanced fibrosis with bridging and nodularity/cirrhosis	83.6%
fibrosis with bridging between vascular structures	10.0%
Other (please specify in Comments)	1.8%
no fibrosis/equivocal fibrosis	0.9%
hepatocyte loss or bridging - favour collapse not fibrosis	0.9%

Diagnostic categories:	Popularity:
steatotic liver disease - alcohol related liver disease	46.0%
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	33.6%
Other (please enter alternative diagnosis in comments box)	5.3%

- histologically indeterminate for cause	4.4%
acute / subacute hepatitis - autoimmune / drug / viral	2.7%
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box)	1.8%
drug induced liver injury (please specify in comments box)	1.8%
manifestation of systemic or extrahepatic disease (please specify in comments box)	0.9%
prothrombotic disorder (please specify in comments box)	0.9%
steatotic liver disease - metabolic dysfunction associated MASLD	0.9%
primary biliary cholangitis	0.9%
primary sclerosing cholangitis	0.9%

Diagnosis Combination:	**Count:**
steatotic liver disease - alcohol related liver disease	47
steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	36
[No selections made]	8
Other (please enter alternative diagnosis in comments box)	4
- histologically indeterminate for cause	2
- histologically indeterminate for cause, chronic viral hepatitis (hepatotrophic viruses - please specify in comments box)	1
- histologically indeterminate for cause, Other (please enter alternative diagnosis in comments box)	1
- histologically indeterminate for cause, steatotic liver disease - alcohol related liver disease	1
acute / subacute hepatitis - autoimmune / drug / viral	1
acute / subacute hepatitis - autoimmune / drug / viral, drug induced liver injury (please specify in comments box)	1
acute / subacute hepatitis - autoimmune / drug / viral, steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box), drug induced liver injury (please specify in comments box)	1
manifestation of systemic or extrahepatic disease (please specify in comments box), steatotic liver disease - alcohol related liver disease	1
Other (please enter alternative diagnosis in comments box), steatotic liver disease - either alcohol related or metabolic dysfunction associated or both Met-ALD	1
primary biliary cholangitis, steatotic liver disease - alcohol related liver disease	1
primary sclerosing cholangitis, steatotic liver disease - alcohol related liver disease	1
prothrombotic disorder (please specify in comments box), steatotic liver disease - alcohol related liver disease	1
steatotic liver disease - metabolic dysfunction associated MASLD	1

Original report and further information (if any): Mild steatohepatitis, marked phlebosclerosis and marked hepatic fibrosis falling short of an established cirrhosis. The pattern of the fibrosis together with the presence of marked phlebosclerosis suggest that the most likely diagnosis is advanced alcohol-related liver disease. The significance of the tiny patch of EMH is uncertain as is the relationship between the hepatic changes and the observed PUO/fevers and pulmonary lesions.

Case 10; *Points of consensus from dropdowns menus:*

Tumour: 3 select FNH (2 this is the only selection)

Pattern: 61 steatohepatitis alone, +18 steatosis alone =79 short of consensus

Stage: consensus for advanced fibrosis

Diagnosis: steatotic liver disease alcohol or mixed = 86, 1 SLD metabolic = 87, 'other' at least 2 have alc or metALD in text. There is consensus for steatotic liver disease diagnosis ***alone***

Complete answer for 10 marks would include: advanced fibrosis ***and*** *steatotic liver disease*

If either missing lose 5, both missing lose 10, if making another diagnosis in addition to steatotic liver disease (chronic viral, AIH, chronic biliary disease) lose 5
If diagnosis of FNH lose 10

Case Number: L25_B11

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Male 42. PM history Ã—2 renal transplant for IgA nephropathy-first 2010, second 2023. Treated hep C (acquired at time of renal transplant). HTN, diabetes. Imaging shows cirrhotic liver with portal HN. NILS negative. ?MASLD serosa. Medical history: Tacrolimus, prednisolone, MMF, ramipril, amlodipine, omeprazole, metformin, gliclazide, cinacalcet, bisoprolol, atorvastatin, aspirin.

Specimen: Liver core biopsy

Macroscopic: A single cream core received measuring 26 mm

Immunohistochemistry: Reticulin, Picrosirius red

Tumour:	Popularity:
- No tumour/lesion present	95.5%
Other (please specify in Comments)	1.8%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		101
- No tumour/lesion present	- No tumour/lesion present	4
		3
Other (please specify in Comments)		2

Pattern:	Popularity:
vascular disease	52.7%
chronic hepatitis	33.6%
Other (please specify in Comments)	21.8%
lobular hepatitis	13.6%
steatosis	2.7%
abnormal, no pattern discernible	2.7%
steatohepatitis	1.8%
iron overload	0.9%
within normal limits	0.9%
cholestasis, bilirubinostasis	0.9%

Pattern 1:	Pattern 2:	Count:
vascular disease		30

chronic hepatitis		18
Other (please specify in Comments)		13
vascular disease	chronic hepatitis	12
lobular hepatitis		6
vascular disease	lobular hepatitis	5
abnormal, no pattern discernible		3
chronic hepatitis	vascular disease	3
Other (please specify in Comments)	vascular disease	2
		2
chronic hepatitis	Other (please specify in Comments)	2
vascular disease	steatosis	2
steatohepatitis	Other (please specify in Comments)	2
vascular disease	Other (please specify in Comments)	2
lobular hepatitis	steatosis	1
Other (please specify in Comments)	Other (please specify in Comments)	1
Other (please specify in Comments)	chronic hepatitis	1
Other (please specify in Comments)	iron overload	1
cholestasis, bilirubinostasis	lobular hepatitis	1
chronic hepatitis	lobular hepatitis	1
vascular disease	within normal limits	1
lobular hepatitis	vascular disease	1

Stages:	**Popularity:**
mild/early fibrosis without bridging	30.9%
subtle architectural abnormalities, vascular disease	29.1%
fibrosis with bridging between vascular structures	20.9%
Other (please specify in Comments)	5.5%
no fibrosis/equivocal fibrosis	4.5%
advanced fibrosis with bridging and nodularity/cirrhosis	4.5%
hepatocyte loss or bridging - favour collapse not fibrosis	3.6%

Diagnostic categories:	**Popularity:**
Other (please enter alternative diagnosis in comments box)	32.6%
drug induced liver injury (please specify in comments box)	20.2%
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box)	18.6%
manifestation of systemic or extrahepatic disease (please specify in comments box)	9.3%
transplant complication NOS (please specify in comments box)	6.2%
- histologically indeterminate for cause	5.4%
acute / subacute hepatitis - autoimmune / drug / viral	4.7%
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	1.6%
steatotic liver disease - metabolic dysfunction associated MASLD	1.6%

Diagnosis Combination:	**Count:**
Other (please enter alternative diagnosis in comments box)	31
drug induced liver injury (please specify in comments box)	17
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box)	9
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box), Other (please enter alternative diagnosis in comments box)	8
manifestation of systemic or extrahepatic disease (please specify in comments box)	8
- histologically indeterminate for cause	6

[No selections made]	5
acute / subacute hepatitis - autoimmune / drug / viral	5
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box), drug induced liver injury (please specify in comments box)	5
chronic viral hepatitis (hepatotrophic viruses - please specify in comments box), transplant complication NOS (please specify in comments box)	2
manifestation of systemic or extrahepatic disease (please specify in comments box), transplant complication NOS (please specify in comments box)	2
non-hepatotrophic - viral, bacterial, parasitic (please specify in comment box)	2
transplant complication NOS (please specify in comments box)	2
- histologically indeterminate for cause, Other (please enter alternative diagnosis in comments box)	1
acute / subacute hepatitis - autoimmune / drug / viral, transplant complication NOS (please specify in comments box)	1
drug induced liver injury (please specify in comments box), manifestation of systemic or extrahepatic disease (please specify in comments box)	1
drug induced liver injury (please specify in comments box), Other (please enter alternative diagnosis in comments box)	1
drug induced liver injury (please specify in comments box), steatotic liver disease - metabolic dysfunction associated MASLD	1
drug induced liver injury (please specify in comments box), transplant complication NOS (please specify in comments box)	1
manifestation of systemic or extrahepatic disease (please specify in comments box), Other (please enter alternative diagnosis in comments box)	1
steatotic liver disease - metabolic dysfunction associated MASLD	1

Original report and further information (if any): Liver core biopsy: Nodular regenerative hyperplasia with perisinusoidal fibrosis. Comment The demonstration of nodular regenerative hyperplasia (NRH) is consistent with the presenting history of portal hypertension and imaging suggesting nodularity. Nodular regenerative hyperplasia is known to be associated with a history of end stage renal disease and renal transplantation. The immunosuppressive agents these patients are on are thought to explain this association in many, with azathioprine a common causative agent. I cannot identify that this patient has ever been on azathioprine, although this possibility should be excluded by a clinician more familiar with the patient

Case 11; *Points of consensus from dropdowns menus:*
Pattern: vascular disease +/- steatosis = 37, vascular disease + lobular or chronic hepatitis (21) = 58.
In text box NRH/PSVD/something in vascular spectrum, have to include venous outflow obstruction, additional 25 = 83.
Stage: no consensus
Diagnosis: 26 select DILI alone or in combination, no consensus.
Have to exclude no consensus

Case Number: L25_B12

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Male 59. Decompensated chronic liver disease

Specimen: Liver explant (recipient's own liver removed at time of transplant)

Macroscopic: Liver explant received fixed weighing 1062g and measuring 195 x 145 x Â 95mm with attached gallbladder 65 x 30 containing bile and no gallstones. The parenchyma has a tan nodular appearance with nodules ranging from 2 to 5mm. No suspicious lesions are seen.

Immunohistochemistry: PASD, perls, victoria blue, EPSR and PiZ immunohistochemistry

Tumour:	Popularity:
- No tumour/lesion present	97.3%
hepatocellular lesion - dysplastic nodule	0.9%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		104
- No tumour/lesion present	- No tumour/lesion present	3
		2
hepatocellular lesion - dysplastic nodule		1

Pattern:	Popularity:
Other (please specify in Comments)	72.7%
iron overload	70.9%
chronic hepatitis	18.2%
abnormal, no pattern discernible	2.7%

Pattern 1:	Pattern 2:	Count:
Other (please specify in Comments)	iron overload	33
iron overload	Other (please specify in Comments)	28
Other (please specify in Comments)		18
chronic hepatitis		9
chronic hepatitis	iron overload	7
iron overload		5
iron overload	chronic hepatitis	4
		2
abnormal, no pattern discernible		2
abnormal, no pattern discernible	iron overload	1
Other (please specify in Comments)	Other (please specify in Comments)	1

Stages:	Popularity:
advanced fibrosis with bridging and nodularity/cirrhosis	99.1%

Diagnostic categories:	Popularity:
Other (please enter alternative diagnosis in comments box)	35.0%
iron overload - acquired, secondary	22.0%
iron overload, hereditary	17.5%
manifestation of systemic or extrahepatic disease (please specify in comments box)	14.1%
storage disorder (please specify in comments box)	11.3%

Diagnosis Combination:	Count:
Other (please enter alternative diagnosis in comments box)	25
iron overload - acquired, secondary, Other (please enter alternative diagnosis in comments box)	19
iron overload, hereditary, Other (please enter alternative diagnosis in comments box)	17
iron overload - acquired, secondary, manifestation of systemic or extrahepatic disease (please specify in comments box)	12

iron overload - acquired, secondary, storage disorder (please specify in comments box)	8
iron overload, hereditary, manifestation of systemic or extrahepatic disease (please specify in comments box)	7
manifestation of systemic or extrahepatic disease (please specify in comments box)	6
storage disorder (please specify in comments box)	6
iron overload, hereditary, storage disorder (please specify in comments box)	5
[No selections made]	2
iron overload, hereditary	2
Other (please enter alternative diagnosis in comments box), storage disorder (please specify in comments box)	1

Original report and further information (if any): Cirrhosis with alpha-1-antitrypsin accumulation, abnormal PiZ phenotype, and grade 3 siderosis therefore a genetic abnormality of iron handing should be considered.

Case 12: *Points of consensus from dropdowns menus:*
Tumour: 1 dysplastic nodule

Pattern: no consensus (67 iron overload)

Stage: consensus (everyone) for advanced

Diagnosis: no consensus from dropdowns (65 Fe overload) everyone has A1AT deficiency in text box (1 non responder)

*Complete answer for 10 marks would include: advanced fibrosis **and** A1AT deficiency **and** reference to iron somewhere in response (there is consensus for this, added at meeting).*

Dysplastic nodule lose 5 n=1

Case Number: L25_B13

Number of responses: 110. Date of analysis: 29 Oct 2025

Clinical: Male 30. ANCA and ANA + Increased IgG (19) , ketamine use. Normal MRCP. ALP 800 AST 160 GGT 1200. Weight loss, increased stool frequency, no blood or mucus. Cocaine history, 12 pints lager per week.

Specimen: biopsy

Macroscopic: liver core

Immunohistochemistry: HVG Rhodanine

Tumour:	**Popularity:**
- No tumour/lesion present	67.3%

Tumour 1:	Tumour 2:	Count:
- No tumour/lesion present		71
		36
- No tumour/lesion present	- No tumour/lesion present	3

Pattern:	Popularity:
chronic biliary disease	36.4%
chronic hepatitis	35.5%
lobular hepatitis	11.8%
Other (please specify in Comments)	3.6%
cholestasis, bilirubinostasis	1.8%

Pattern 1:	Pattern 2:	Count:
		38
chronic biliary disease		19
chronic hepatitis		15
chronic hepatitis	chronic biliary disease	13
lobular hepatitis		6
chronic biliary disease	chronic hepatitis	5
lobular hepatitis	chronic hepatitis	3
Other (please specify in Comments)		3
lobular hepatitis	chronic biliary disease	2
chronic hepatitis	lobular hepatitis	2
Other (please specify in Comments)	Other (please specify in Comments)	1
chronic hepatitis	chronic hepatitis	1
cholestasis, bilirubinostasis		1
chronic biliary disease	cholestasis, bilirubinostasis	1

Stages:	Popularity:
fibrosis with bridging between vascular structures	39.1%
advanced fibrosis with bridging and nodularity/cirrhosis	25.5%
mild/early fibrosis without bridging	1.8%
hepatocyte loss or bridging - favour collapse not fibrosis	0.9%

Diagnostic categories:	Popularity:
drug induced liver injury (please specify in comments box)	30.3%
autoimmune hepatitis	27.0%
chronic cholangiopathy NOS	12.4%
acute / subacute hepatitis - autoimmune / drug / viral	10.1%
Other (please enter alternative diagnosis in comments box)	7.9%
overlap syndrome	5.6%
Wilson disease	3.4%
- histologically indeterminate for cause	1.1%
primary biliary cholangitis	1.1%
primary sclerosing cholangitis	1.1%

Diagnosis Combination:	Count:
[No selections made]	39
drug induced liver injury (please specify in comments box)	13
autoimmune hepatitis	12
autoimmune hepatitis, drug induced liver injury (please specify in comments box)	9

acute / subacute hepatitis - autoimmune / drug / viral	7
Other (please enter alternative diagnosis in comments box)	7
chronic cholangiopathy NOS	5
overlap syndrome	5
chronic cholangiopathy NOS, drug induced liver injury (please specify in comments box)	3
Wilson disease	3
acute / subacute hepatitis - autoimmune / drug / viral, drug induced liver injury (please specify in comments box)	2
autoimmune hepatitis, chronic cholangiopathy NOS	2
- histologically indeterminate for cause	1
autoimmune hepatitis, primary sclerosing cholangitis	1
chronic cholangiopathy NOS, primary biliary cholangitis	1

Original report and further information (if any): Mixed biliary and hepatitic injury, cannot exclude autoimmune liver disease but this could represent ketamine induced injury.

Version: 1.22