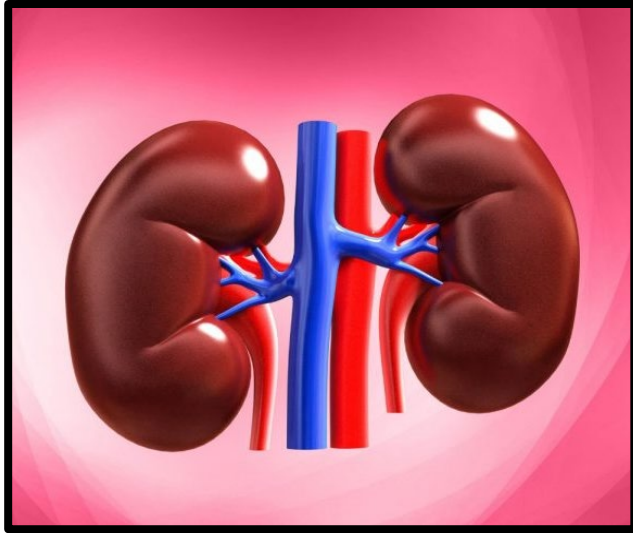
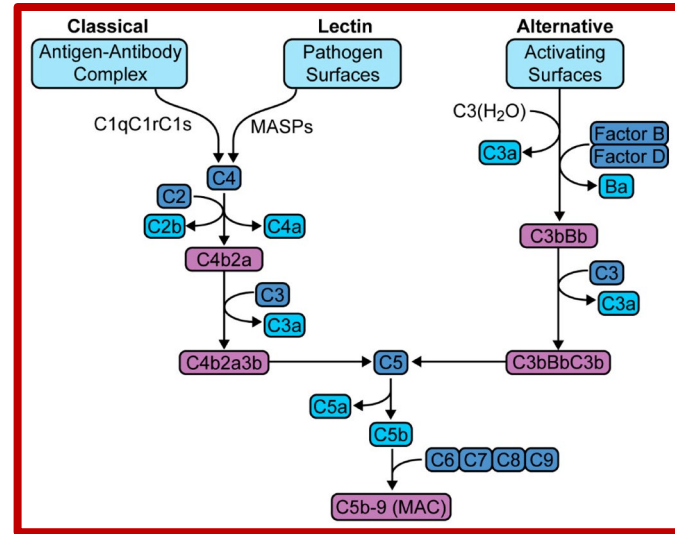


The Kidney



33



Complement

Goals –

1. To understand renal anatomy and how C3G is diagnosed
2. To understand how the complement cascade normally functions
3. To understand the four pillars of a complement evaluation

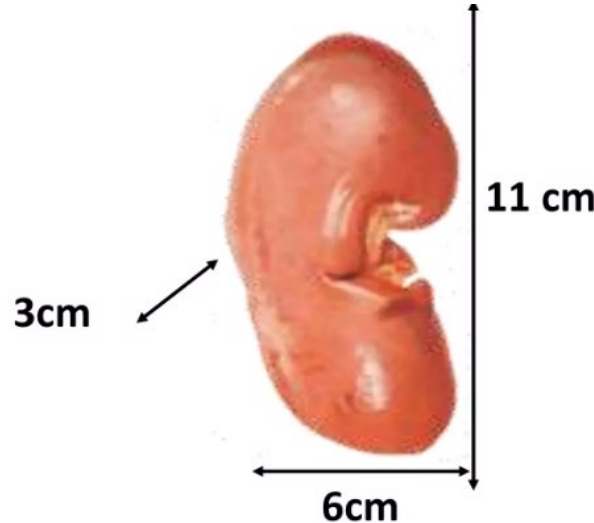
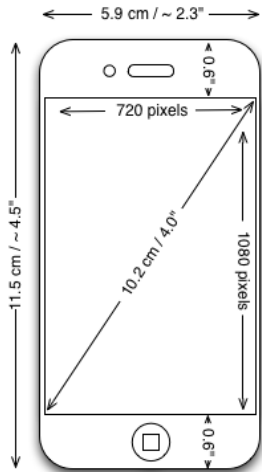
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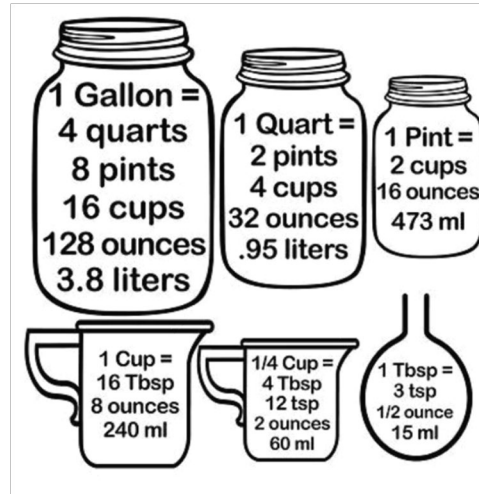
Your Kidneys

1. Each of your kidneys is about as big as your cell phone.
2. Each kidney weighs ~0.2 to 0.5 pounds. A can of Coke weighs 0.75 pounds.



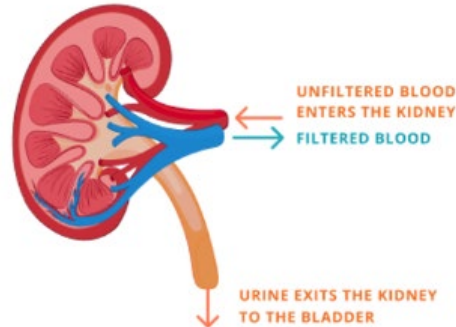
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Your Kidneys

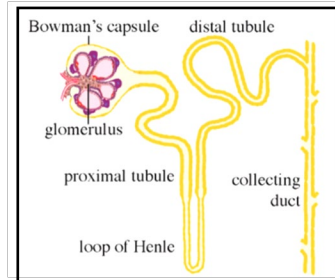
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The Nephron

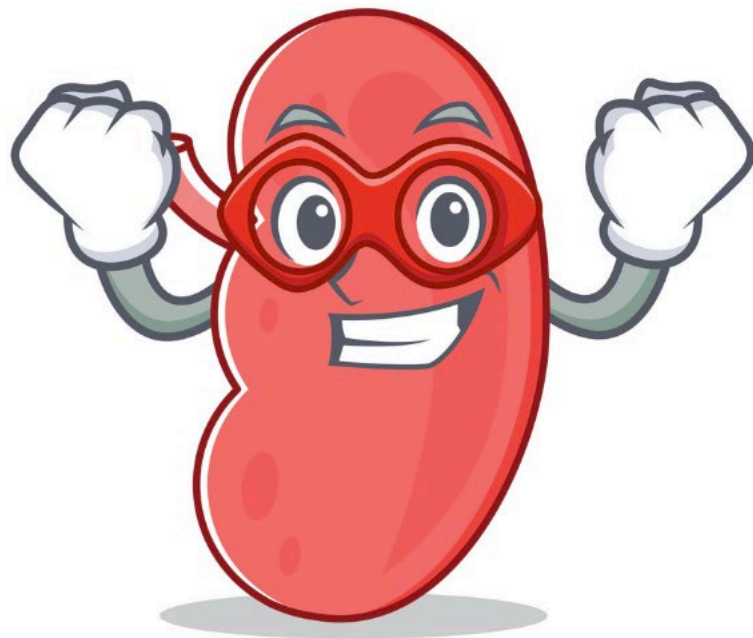


Your Kidneys

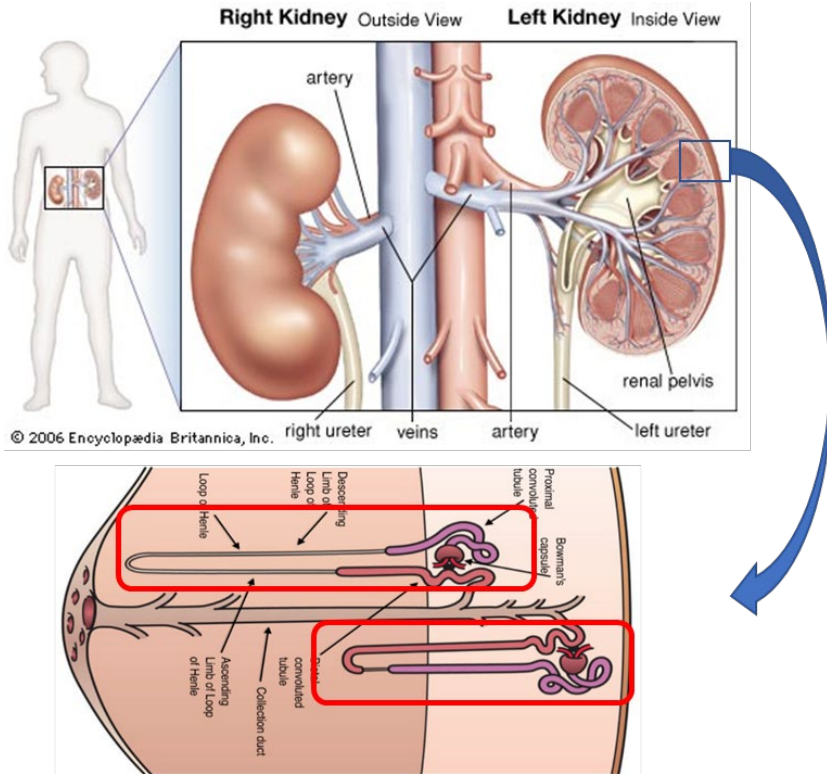
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5. Each filtering unit is called a nephron.
6. Each kidney has about 1,000,000 nephrons (range 200,000-1,800,000). So with two kidneys, you have about 2,000,000 nephrons working 24-7.

Your Kidneys

7. Your kidneys control your blood pressure.
8. Your kidneys make erythropoietin (EPO), which is produced by the peritubular cells of the kidney. EPO is needed to make red blood cells.
9. Your kidneys convert vitamin D to its active form.
10. Your kidneys control the pH of your blood.

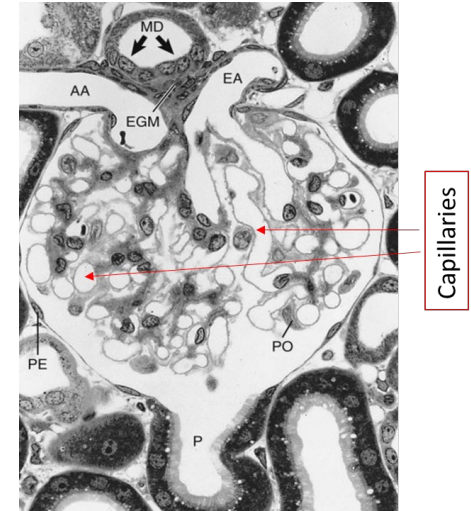
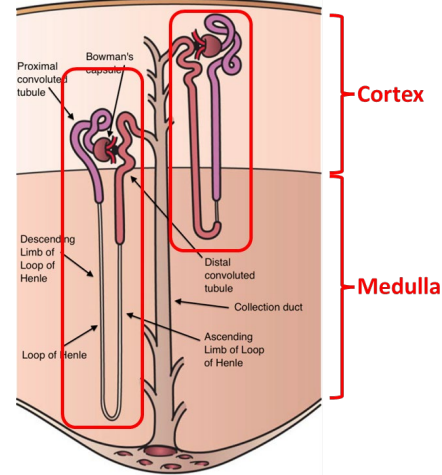
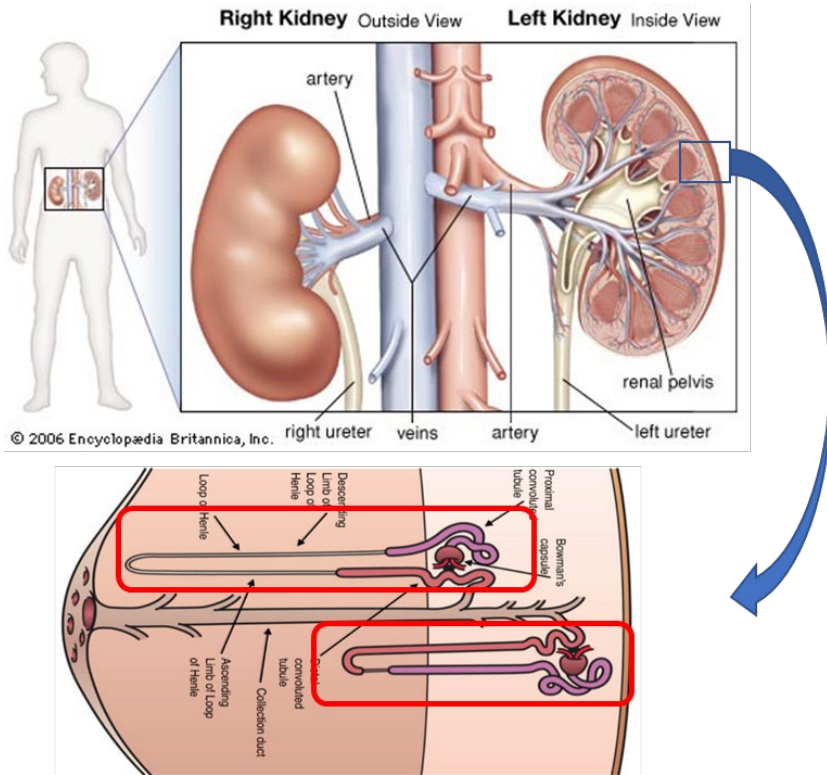


Getting a Kidney Biopsy



Nephrons – the working units of the kidney

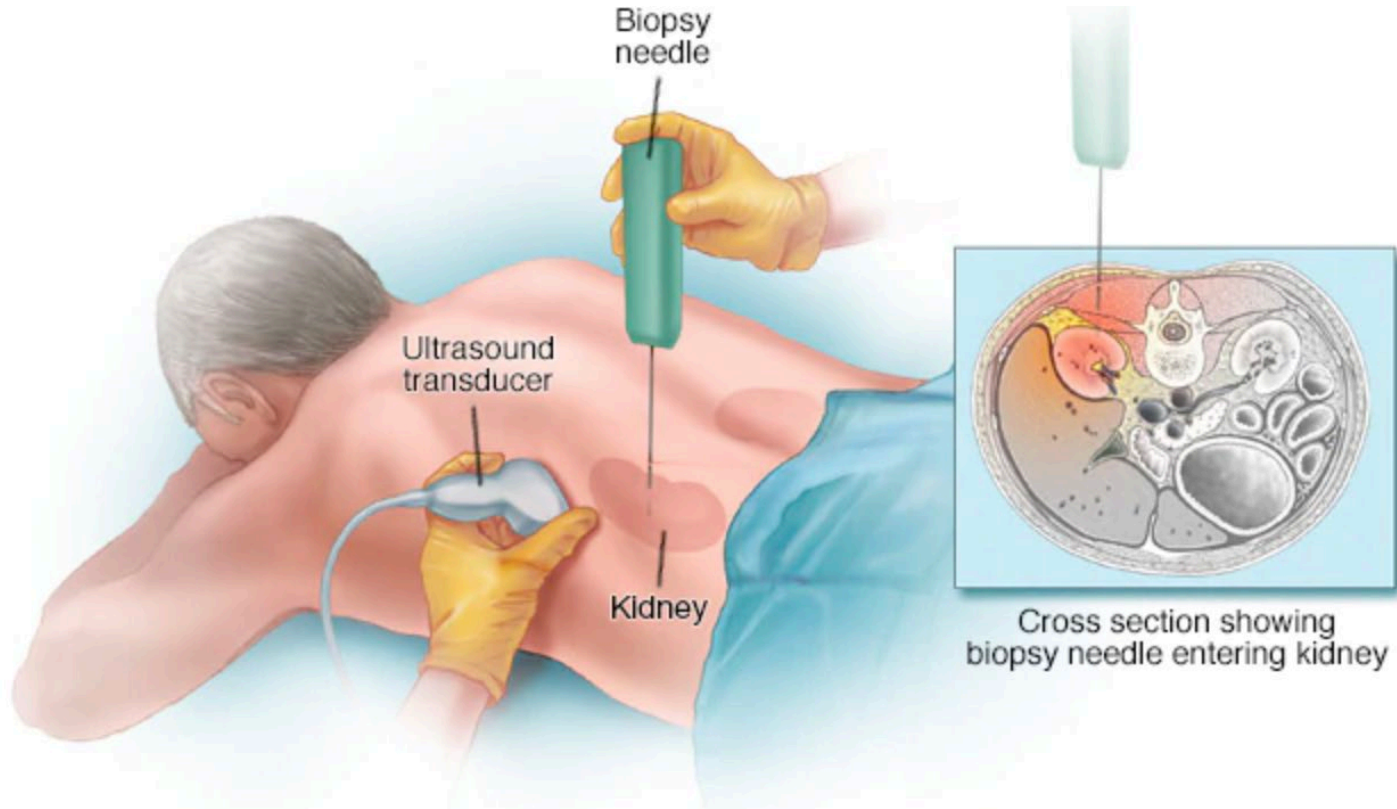
Getting a Kidney Biopsy



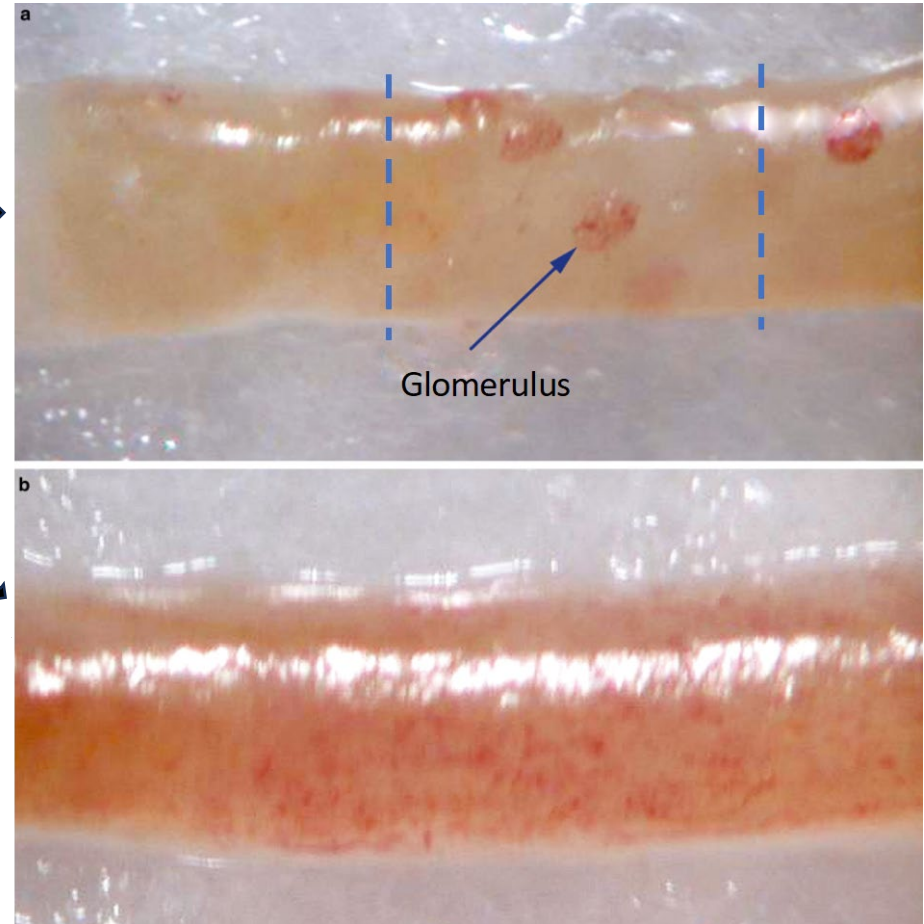
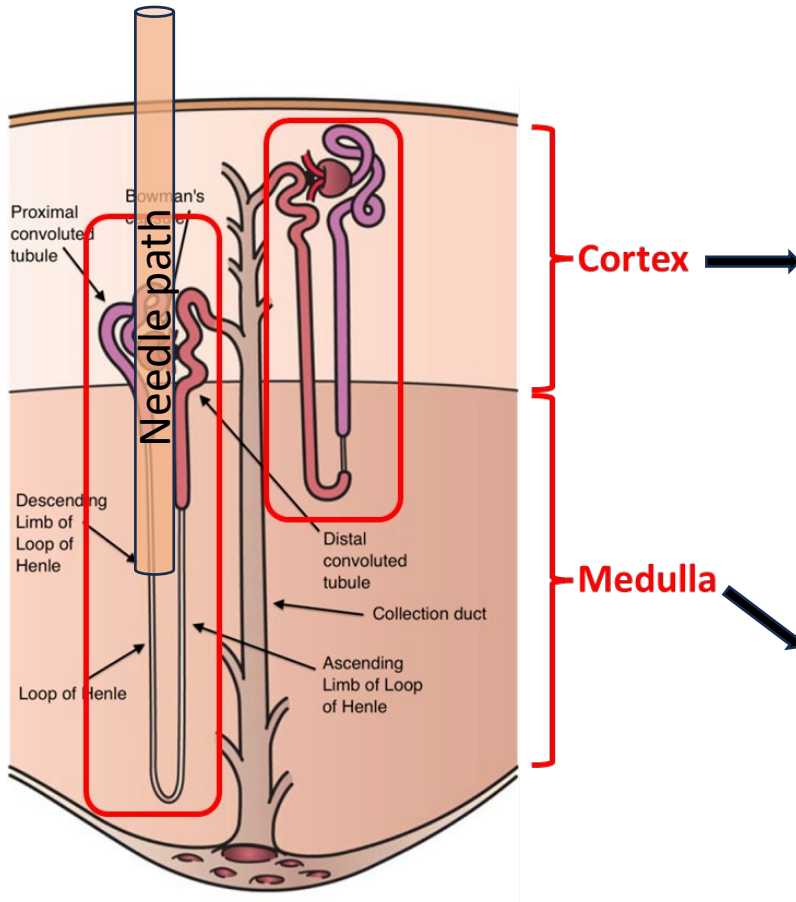
For C3G we are interested in the glomerulus

Nephrons – the working units of the kidney

Getting a Kidney Biopsy



About 1 mm x 20 mm

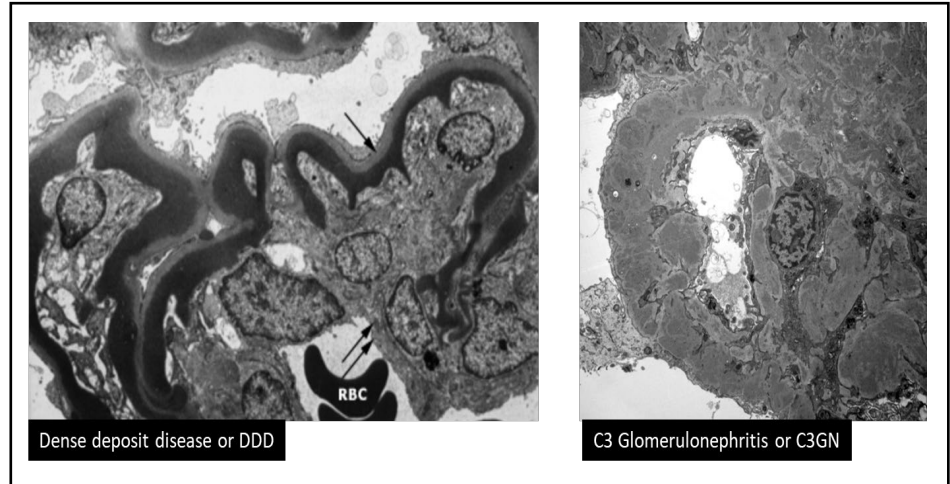
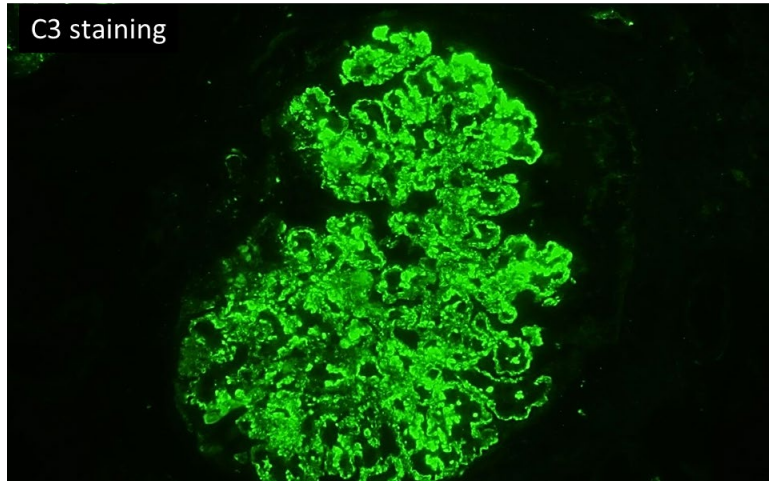


Nephrons – the working units of the kidney

Interpreting the Kidney Biopsy



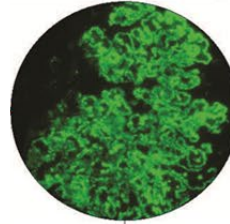
1. Light microscopy
2. Immunofluorescence microscopy (or IF)
3. Electron microscopy (or EM)



Interpreting the Kidney Biopsy

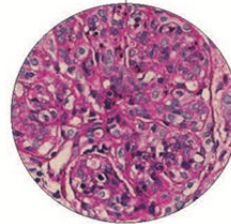
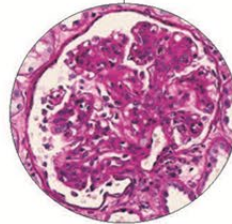
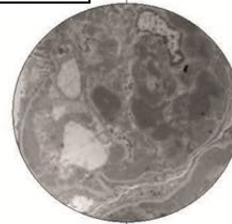
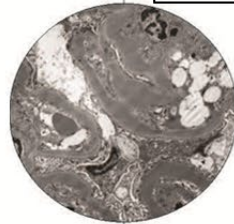
C3 DOMINANT GLOMERULOPATHY

You MUST have C3 positivity on IF



C3 Glomerulopathy

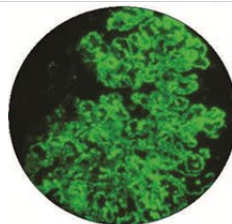
**You MUST have EM to tell
DDD from C3GN**



Interpreting the Kidney Biopsy

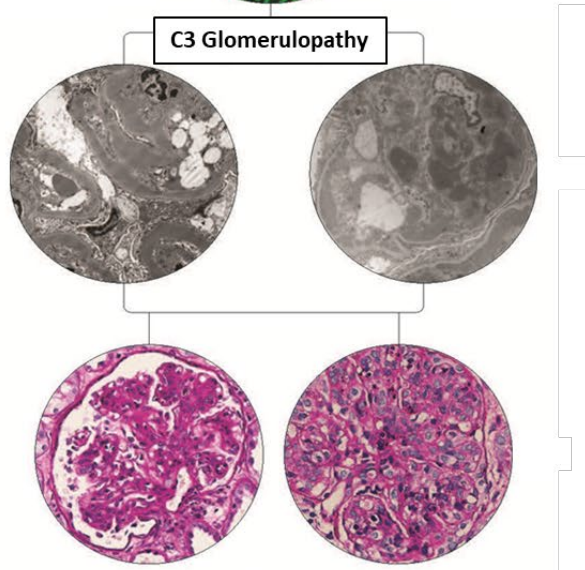
C3 DOMINANT GLOMERULOPATHY

You MUST have C3 positivity on IF



We also think of post-infectious GN and monoclonal gammopathy of renal significance and must **EXCLUDE** them

**You MUST have EM to tell
DDD from C3GN**

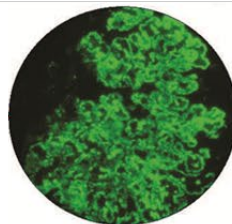


Interpreting the Kidney Biopsy



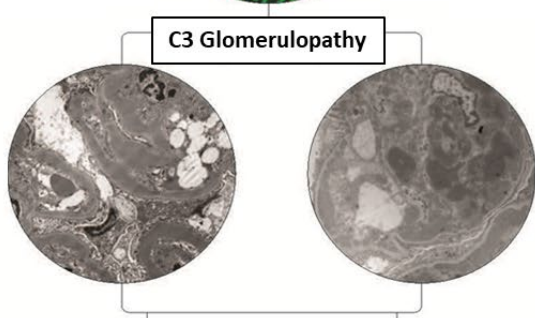
C3 DOMINANT GLOMERULOPATHY

You **MUST** have C3 positivity on IF

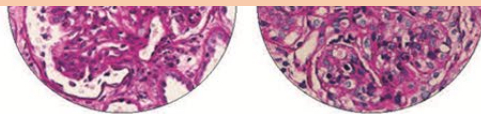


We also think of post-infectious GN and monoclonal gammopathy of renal significance and must **EXCLUDE** them

You **MUST** have EM to tell
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This classification is **ONLY descriptive**. It does **NOT** tell you what is causing the problem, but it suggests the tests to do to determine what is going on.

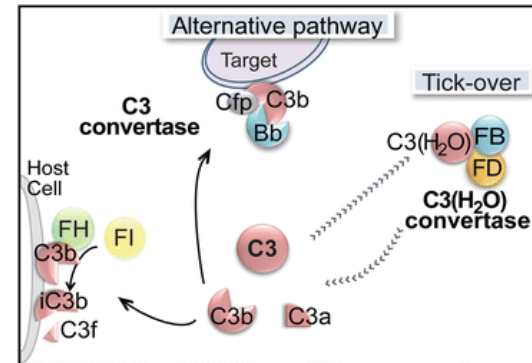
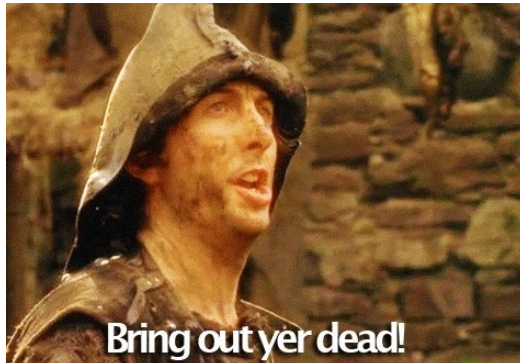


Goals –

1. To understand renal anatomy and how C3G is diagnosed
2. To understand how the complement cascade normally functions
3. To understand the four pillars of a complement evaluation

The Complement Cascade

1. It provides the first line of defense against infection
2. It marks dead and foreign cells as garbage so they can be removed
3. It talks to other systems in your body so your response is coordinated
4. It is “on” all the time. We call that **“tick over”**



The Complement Cascade



Activation

Too much activation

Inflammation



The Setting

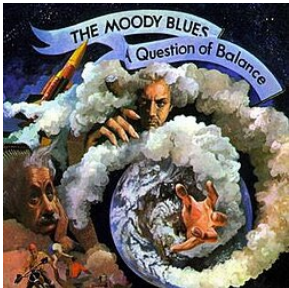
Regulation

Too much control

Infection



Dysregulation = Disease



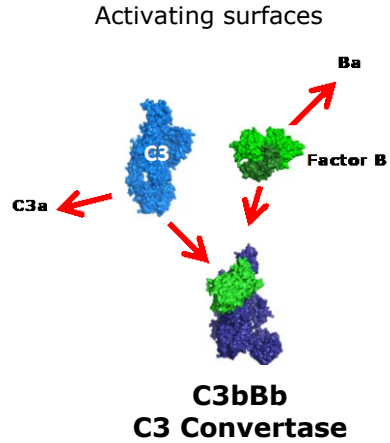
The Three Phases



1. **Initiation phase**: get the complement system going
2. **Amplification phase**: ramp it up
3. **Terminal phase**: do the work - inflammation, cell destruction, and marking cells for removal (garbage pickup)

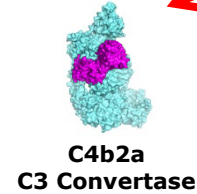
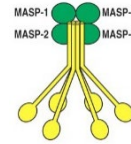
Phase 1 Initiation

Alternative Pathway



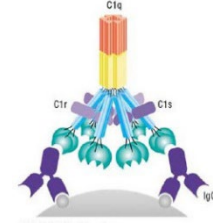
Mannose Binding Lectin

Microbial carbohydrates



Classical Pathway

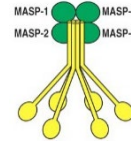
Immune complexes



Phase 1 Initiation

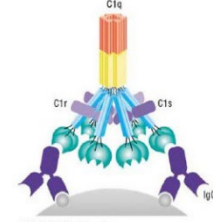
Mannose Binding Lectin

Microbial carbohydrates



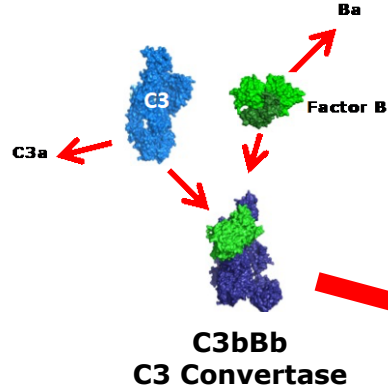
Classical Pathway

Immune complexes

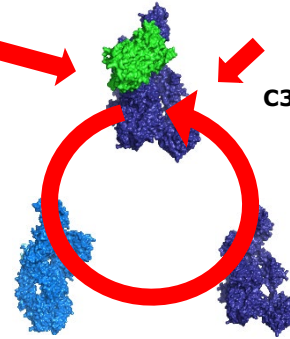


Alternative Pathway

Activating surfaces



Phase 2 Amplification



Amplification is powerful that about ten billion C3b molecules are formed in about 15 minutes.

Phase 1 Initiation

Mannose Binding Lectin

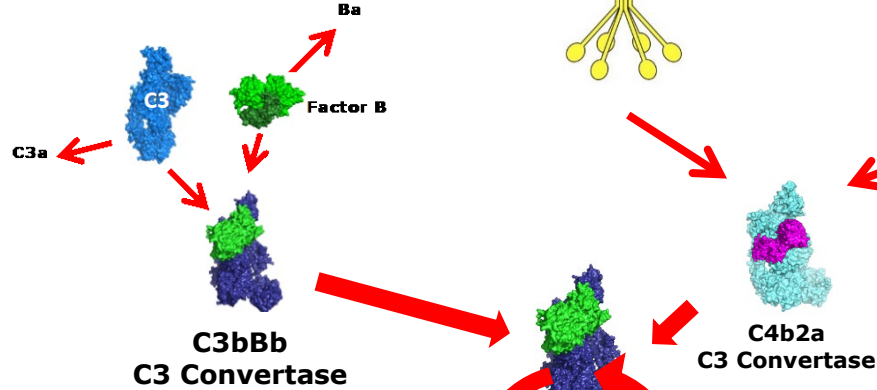
Microbial carbohydrates

Classical Pathway

Immune complexes

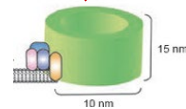
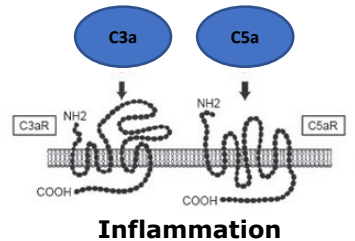
Alternative Pathway

Activating surfaces

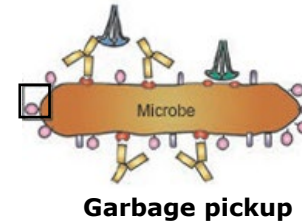


Phase 2 Amplification Loop

Phase 3 Terminal



Cell destruction



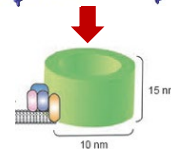
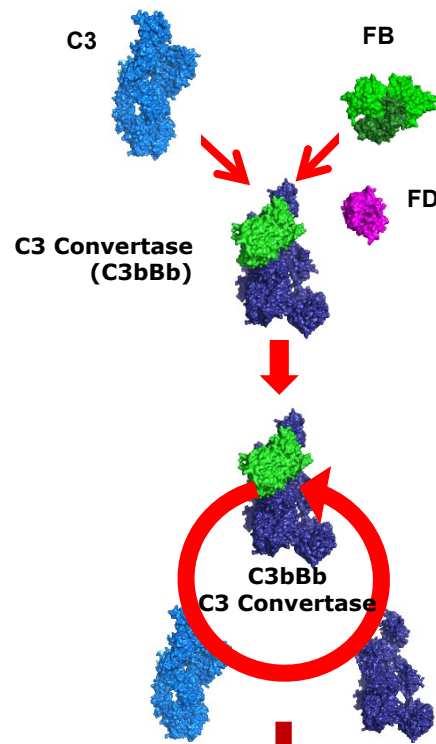
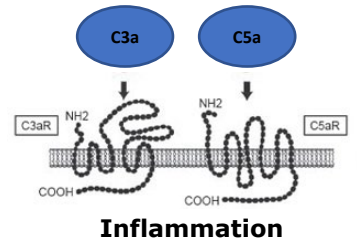
Generation of C5a, MAC, and soluble C5b-9

Alternative Pathway

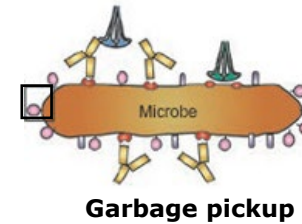
Phase 1
Initiation

Phase 2
Amplification loop

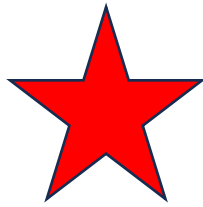
Phase 3
Terminal pathway



Cell destruction



Garbage pickup



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The Four Pillars





The MORL Renal Group provides unrivaled expertise in complement diagnostics for patients with C3G and the TMAs.