Correction to: Abstracts

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Regrettably the following abstract was omitted from the original publication; the abstract was submitted ahead of the submission deadline, and should have been included in the original set of abstracts.

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Renal Amyloidosis: clinicopathological evaluation of 43 cases

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Background & objectives

The amyloidoses are an uncommon group of diseases characterized by abnormal extracellular deposition of misfolded protein fibrils leading to organ dysfunction. The histopathologic changes in a renal biopsy from a patient with systemic

amyloidosis comprise a spectrum of vascular, glomerular and tubulointestinal amyloid deposition.

Methods

We identified 43 cases of renal amyloidosis after a retrospective review of all native renal biopsies evaluated in our department from 2010 through 2019. Demographic information, clinical and laboratory data were obtained from electronic records.

Results

Among the patients, a male predominance was noted (31 males, 12 females). The mean age of the patients at presentation for the entire group was 55 years (range, 26–85). Amyloid was of the AA type in 39 patients and AL type in 3 patients. The type of amyloid was undetermined in one case. Familial Mediterranean Fever (FMF) was the most common primary disease of amyloidosis.

Conclusion

The kidney is one of the most commonly involved organs in patients with systemic amyloidosis. It is also an important reason of renal failure. The AA/AL amyloidosis ratio differs between the countries. In our study, this ratio was found to be 13/1.

The online version of the original article can be found at <https://doi.org/10.1007/s00428-019-02631-8>

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