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On the Cover

What's the diagnosis? Nodular glomerulopathy is a lesion classically seen in patients with diabetic renal disease. Similar pattern of glomerular injury may also be seen in heavy smokers and patients with light and/or heavy chain deposition disease. The mechanism of injury in these circumstances is probably similar, where glucose, cigarette smoke components, or paraproteins cause toxic injury of mesangial cells, and they in turn overproduce the mesangial matrix with formation of nodules. Long-standing membranoproliferative glomerulonephritis (MPGN) can also result in prominent mesangial expansion and nodular glomerulopathy; PAS or silver stains usually show well-developed double contours of the peripheral capillary loops in such cases. Healed mesangiolytic lesions in the context of thrombotic microangiopathy can also result in segmental nodular glomerulosclerosis. Immunofluorescence and electron microscopy studies, as well as detailed clinical history, are essential in differentiating these conditions and diseases. (Image and text provided by Vanesa Bijol, MD, Brigham and Women's Hospital)