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Goodpasture's disease in a patient with advanced lung cancer treated with nivolumab: an autopsy case report

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Abstract

Nivolumab, an anti-programmed death-1 immune checkpoint inhibitor (ICI), is now widely used to treat numerous cancers. Although most adverse effects related to ICIs are controllable, fulminant immune-related adverse events can occur. A 74-year-old patient with non-small-cell lung cancer was treated with nivolumab as a second-line treatment. After 8 cycles, acute kidney injury with macroscopic hematuria appeared, followed by diffuse ground-glass opacities with hemoptysis. Since the clinical course suggested Goodpasture's disease, methylprednisolone pulse therapy and plasma exchange were started. Later, it was confirmed that the serum anti-glomerular basement membrane antibody was positive. However, the patient died 35 days after admission due to respiratory failure, and an autopsy showed crescentic glomerulonephritis and massive alveolar hemorrhage which were compatible with Goodpasture's disease. Our case provides a possible link between nivolumab and lethal Goodpasture's disease.

Keywords: Goodpasture's disease, immune-related adverse events, nivolumab, programmed cell death protein 1

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