

2022 AMERICAN COLLEGE OF RHEUMATOLOGY / EUROPEAN ALLIANCE OF ASSOCIATIONS FOR RHEUMATOLOGY
CLASSIFICATION CRITERIA FOR **MICROSCOPIC POLYANGIITIS**

CONSIDERATIONS WHEN APPLYING THESE CRITERIA

- These classification criteria should be applied to classify a patient as having microscopic polyangiitis when a diagnosis of small- or medium-vessel vasculitis has been made
- Alternate diagnoses mimicking vasculitis should be excluded prior to applying the criteria

CLINICAL CRITERIA

| | |
|---|-----------|
| Nasal involvement: bloody discharge, ulcers, crusting, congestion, blockage, or septal defect / perforation | -3 |
|---|-----------|

LABORATORY, IMAGING, AND BIOPSY CRITERIA

| | |
|--|-----------|
| Positive test for perinuclear antineutrophil cytoplasmic antibodies (pANCA) or antimyeloperoxidase (anti-MPO) antibodies ANCA positive | +6 |
| Fibrosis or interstitial lung disease on chest imaging | +3 |
| Pauci-immune glomerulonephritis on biopsy | +3 |
| Positive test for cytoplasmic antineutrophil cytoplasmic antibodies (cANCA) or antiproteinase 3 (anti-PR3) antibodies | -1 |
| Blood eosinophil count $\geq 1 \times 10^9$ /liter | -4 |

Sum the scores for 6 items, if present. A score of ≥ 5 is needed for classification of **MICROSCOPIC POLYANGIITIS.**



eular

EUROPEAN ALLIANCE
OF ASSOCIATIONS
FOR RHEUMATOLOGY

Arthritis Rheumatol. 2022
Ann Rheum Dis. 2022