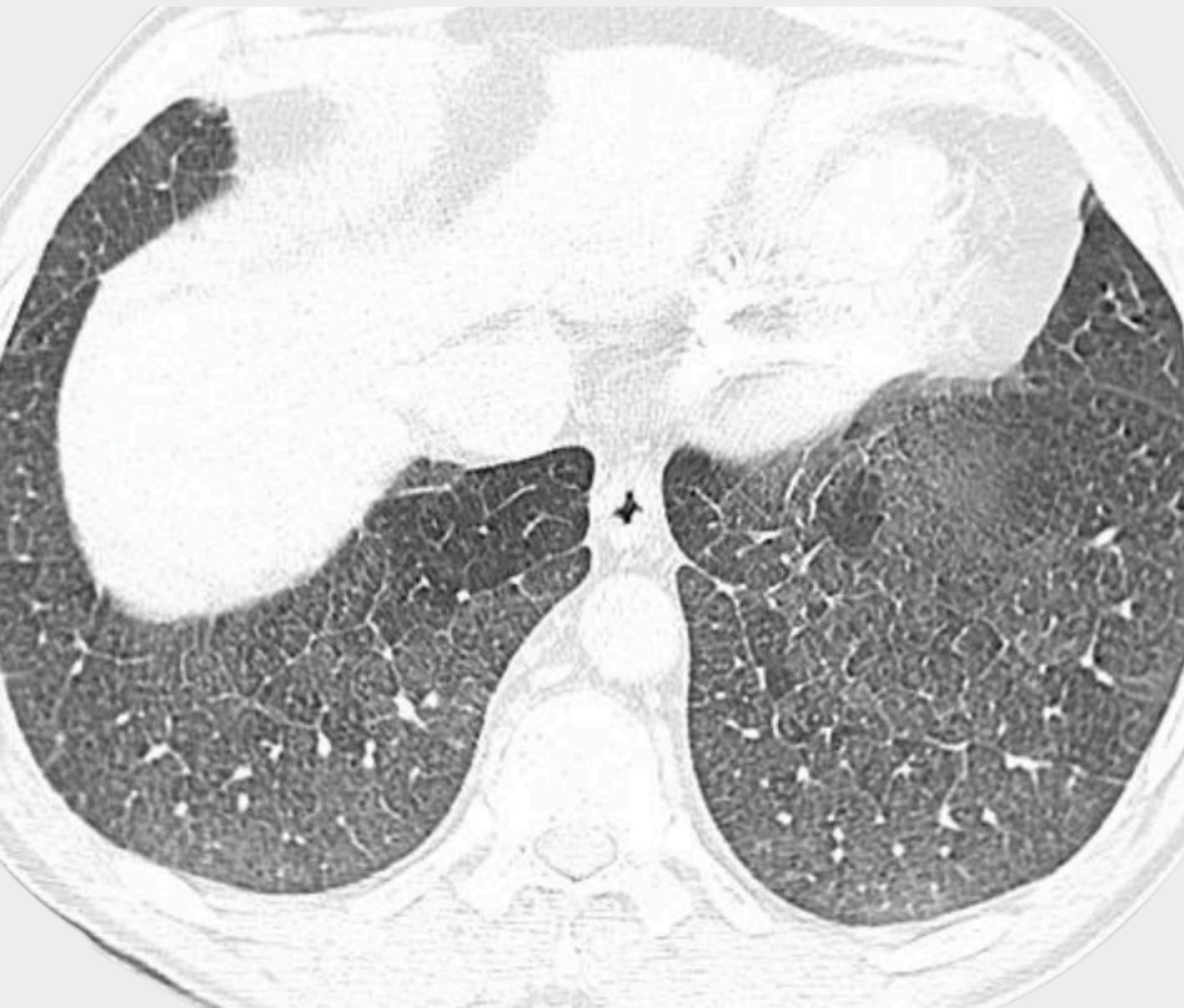


RADIOLOGY BEYOND BORDERS

Indeterminate interstitial lung pattern

Cecilia Ferrario, MD
Hospital universitario Austral
Argentina

Male, 40 yo



HISTORY OF:

Chronic kidney disease on hemodialysis
Congestive heart failure

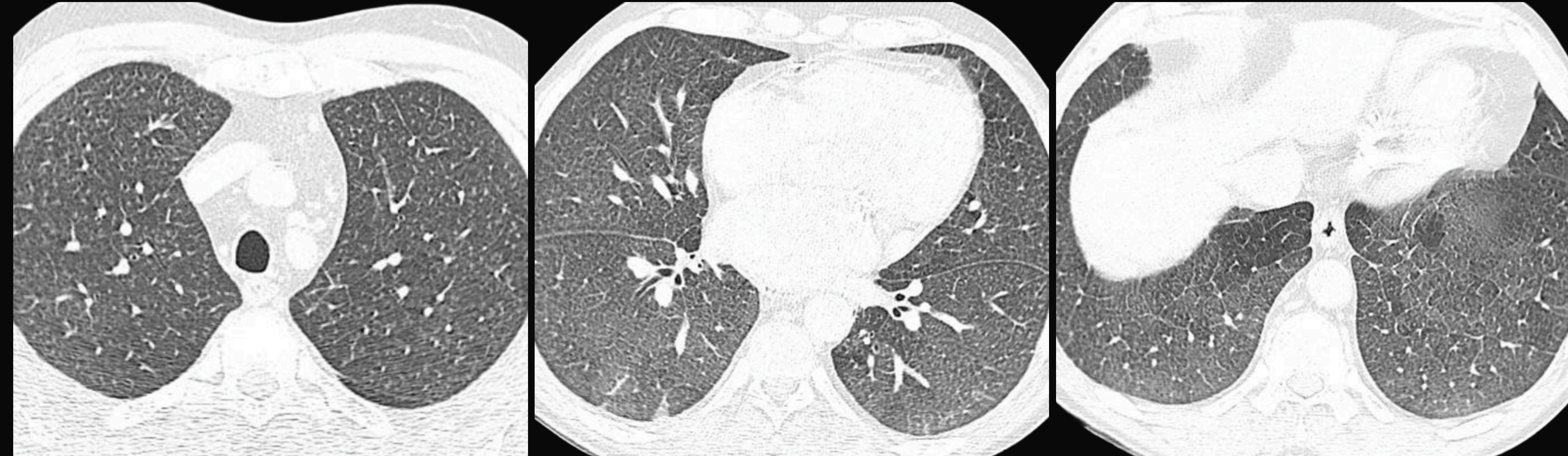
SYMPTOMS:

dyspnea, chronic shortness of breath

WHY THE CT WAS PERFORMED?

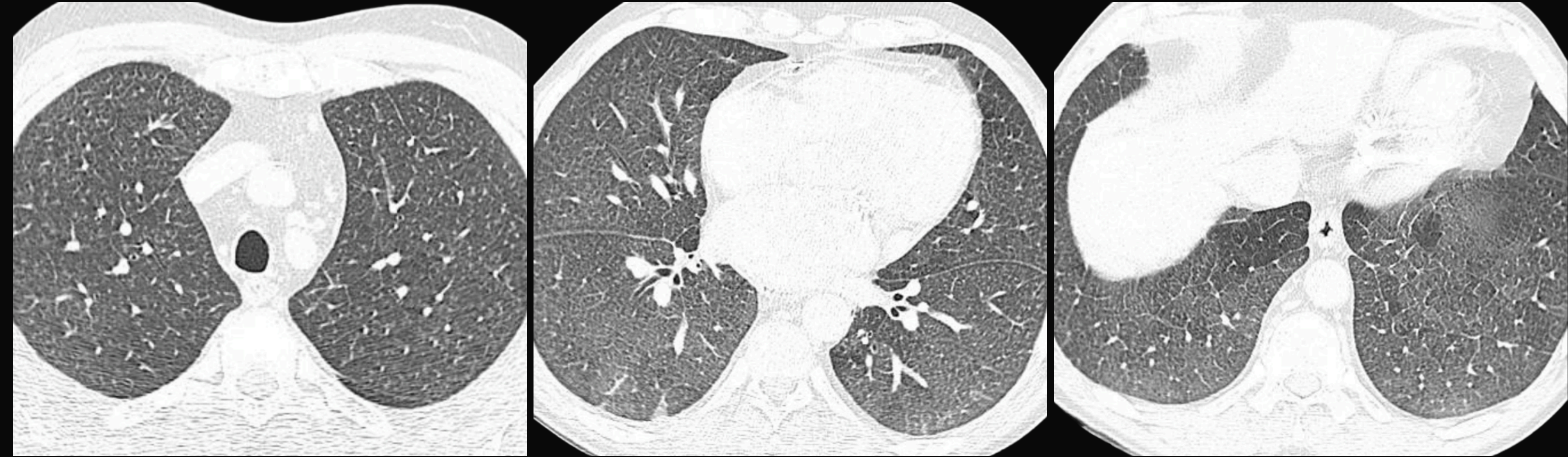
Follow-up of chronic diseases

MAIN IMAGING FINDINGS 1



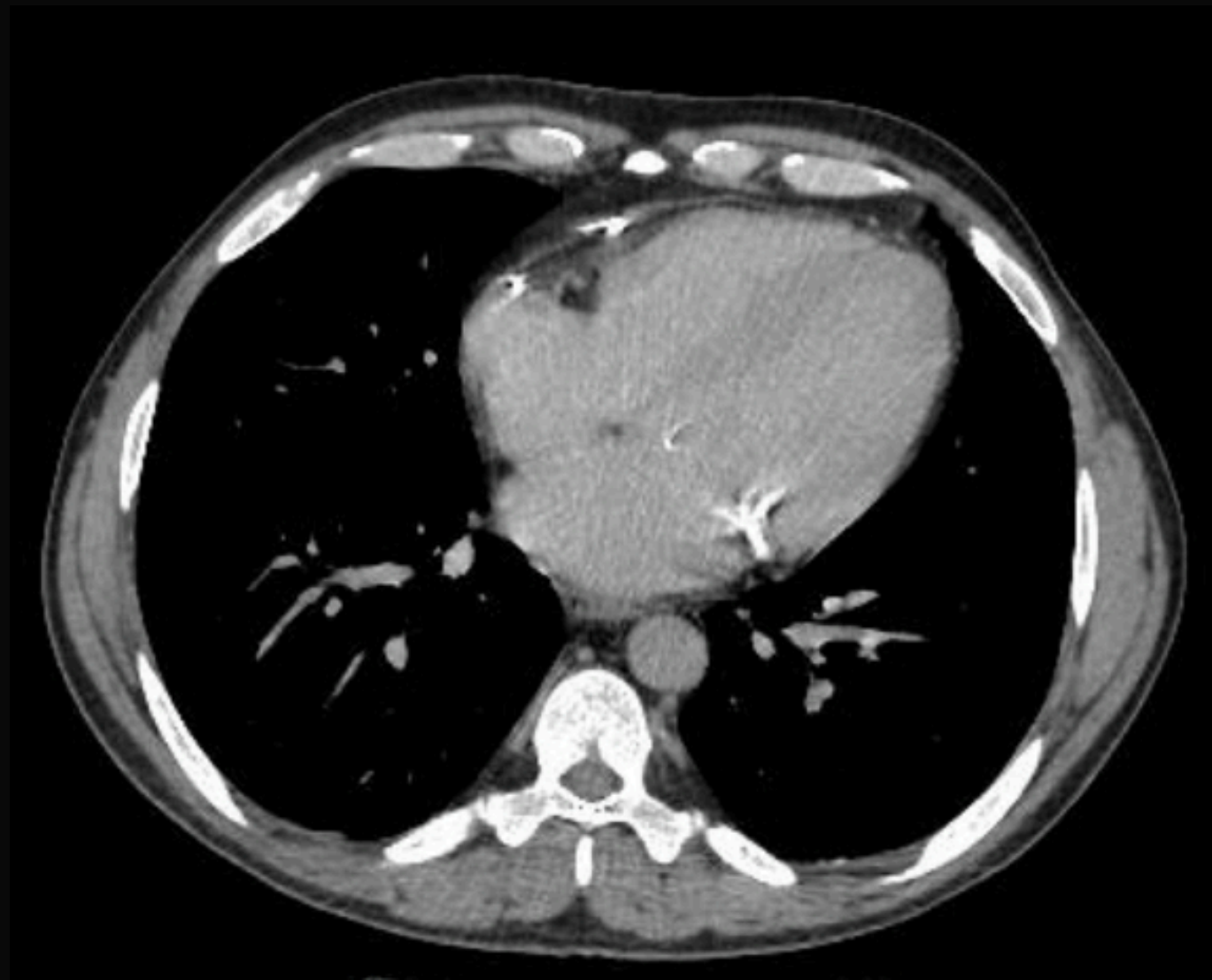
- Bilateral fine reticular pattern caused by septal thickening
- Diffuse and homogeneous distribution
- Associated with centrilobular ground-glass micronodules

MAIN IMAGING FINDINGS 2



- Mosaic attenuation in the lung bases (air trapping?)

MAIN IMAGING FINDINGS 3



- Dilatation of the left heart chambers with pericardial calcifications (sequelae of prior pericarditis?)
- Reduced liver size (chronic liver disease?)
- Splenomegaly
- Bilateral renal atrophy with simple cortical cysts

DIFFERENTIAL DIAGNOSIS



HP. Hipersensitivity

Pneumonitis

Centrilobular distribution

Upper lobes affected

Air trapping Lung bases

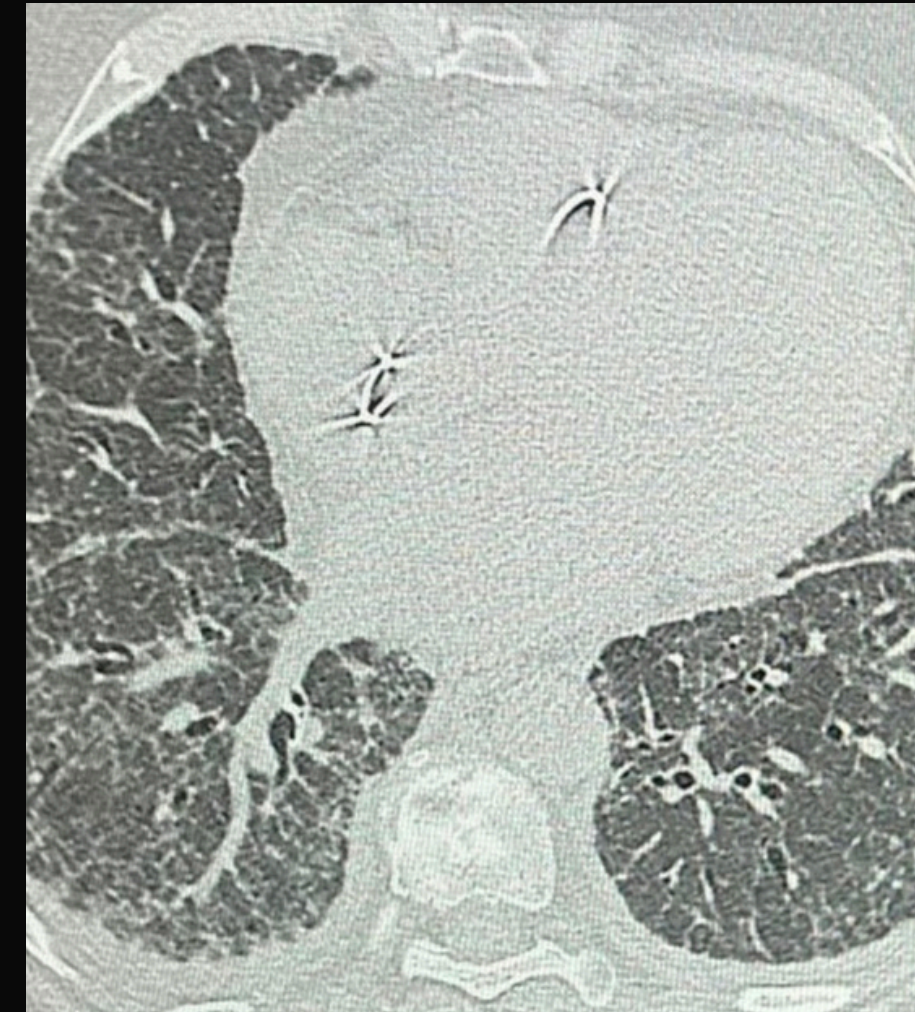


**NSIP. Non specific
interstitial pneumonia**

Bilateral, symmetric and

homogeneous distribution

Ground glass atenuation



**I have seen this pattern
before...**



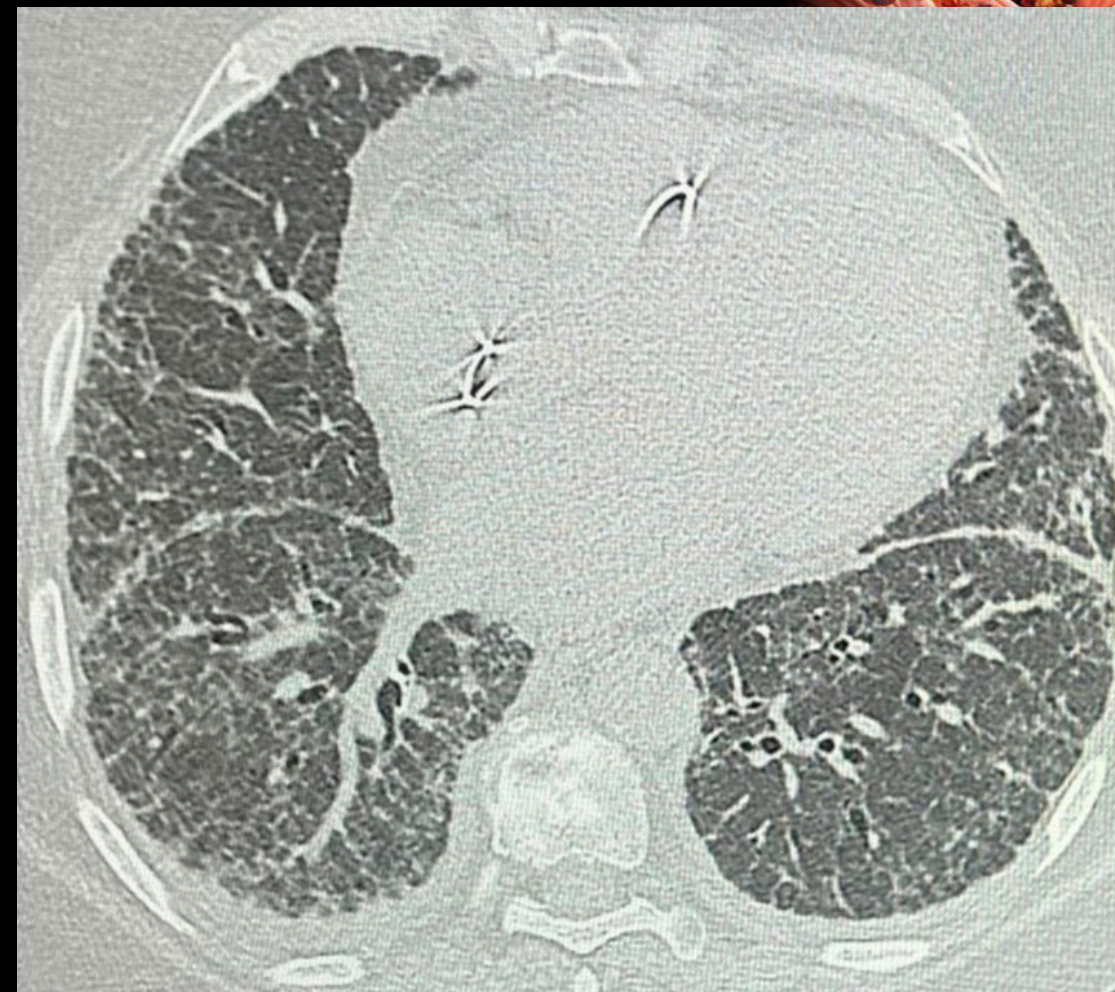
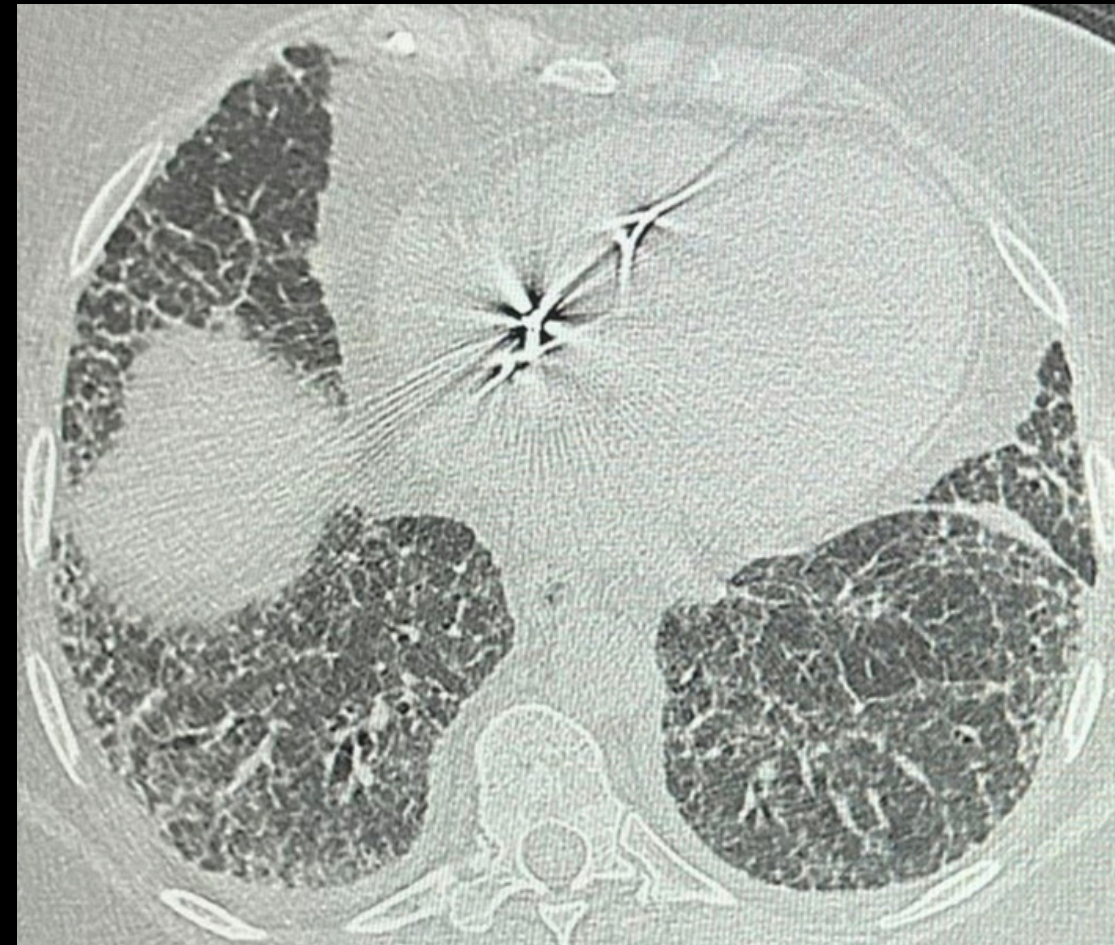
Dra. Cecilia Ferrario @drac... · 28 ago 24 :
Do you think pulmonary fibrosis secondary to chronic pulmonary edema is a thing?

I really want to suggest that diagnosis in this case 🤔

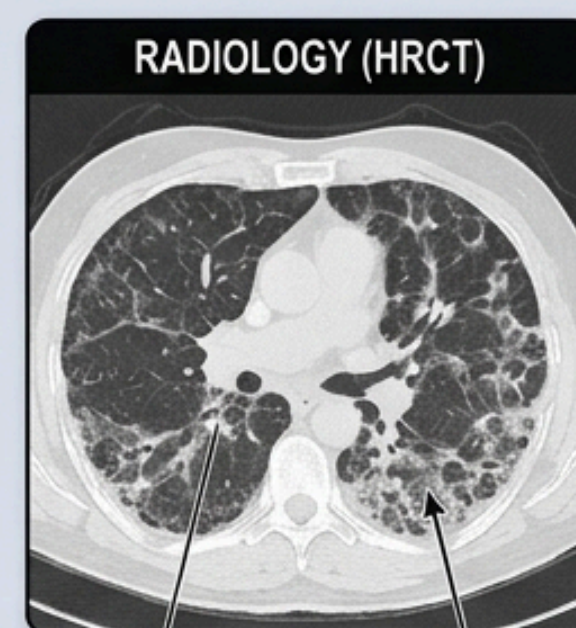
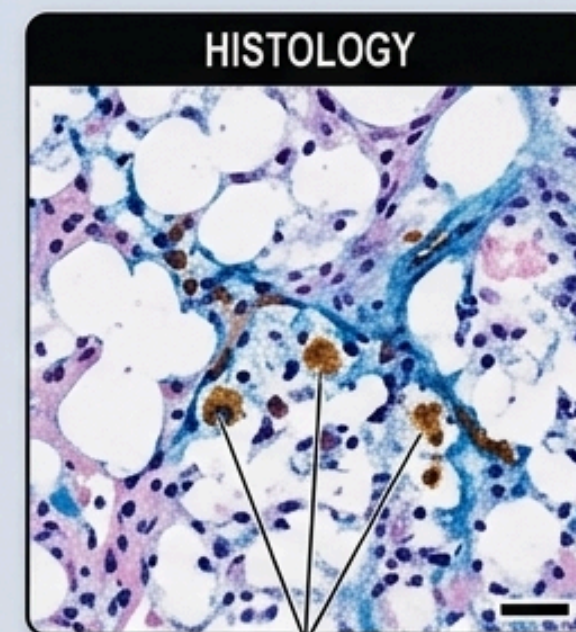
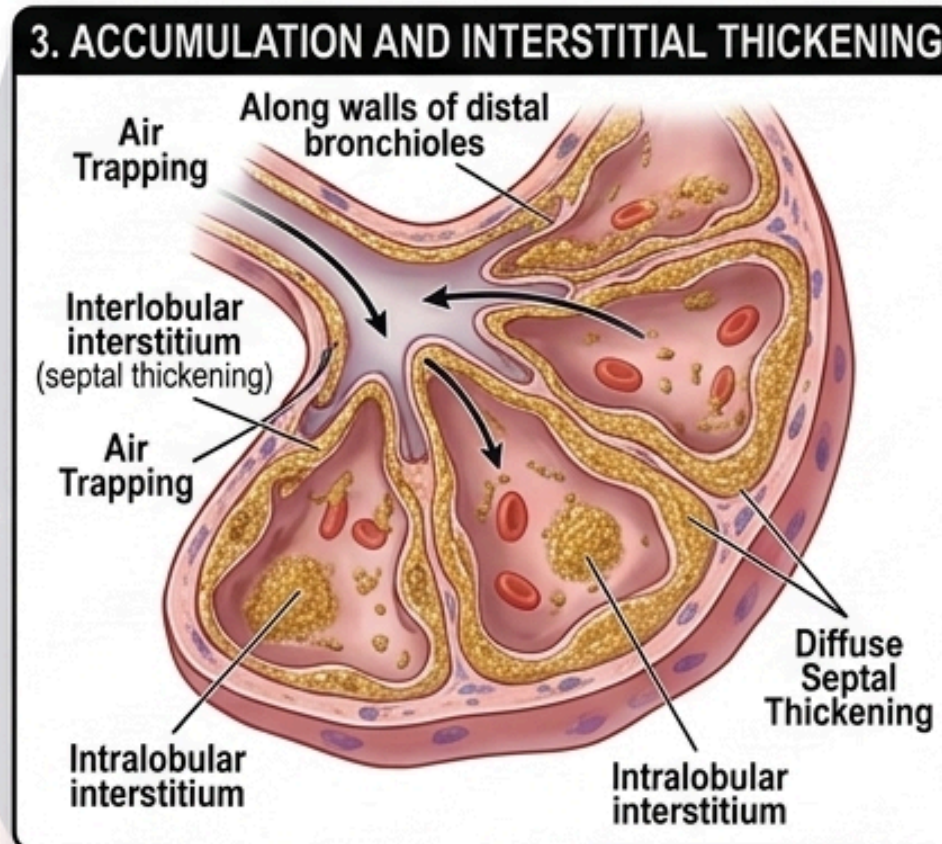
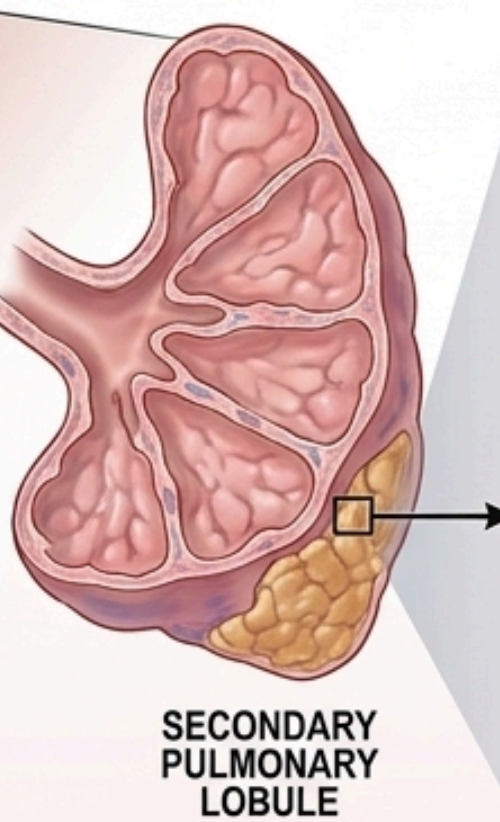
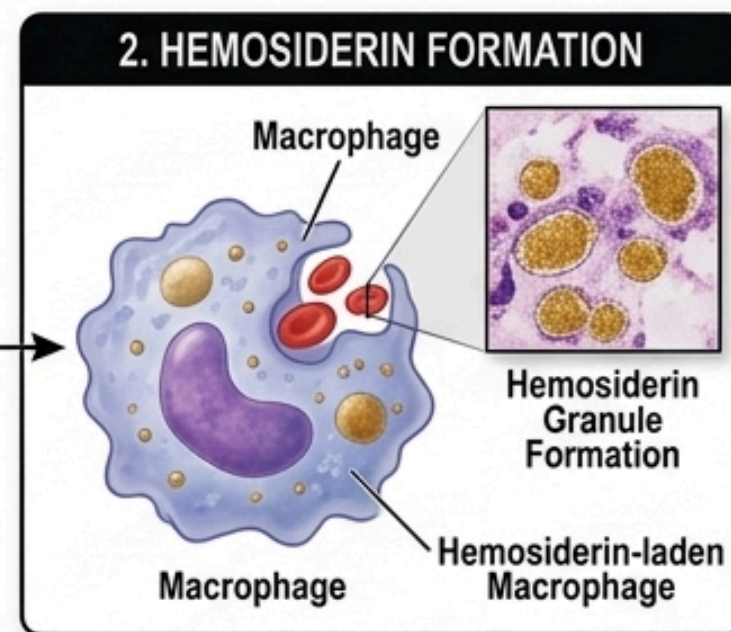
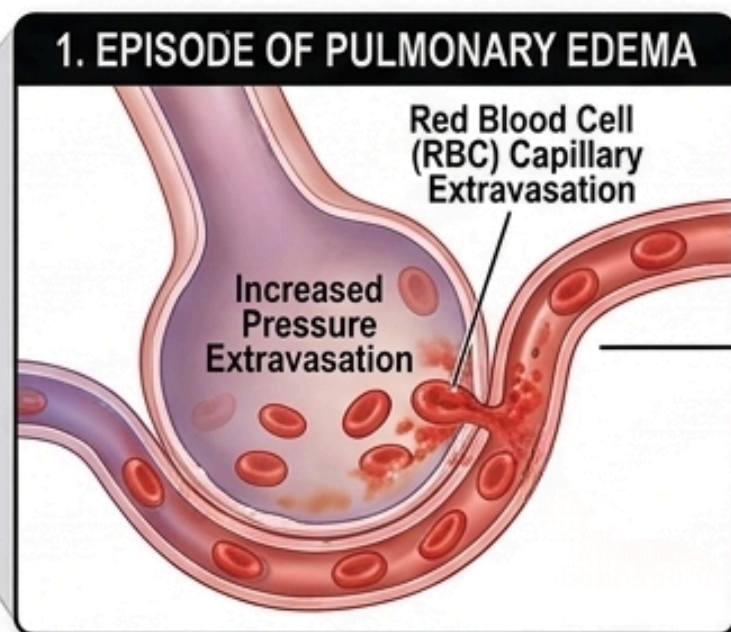
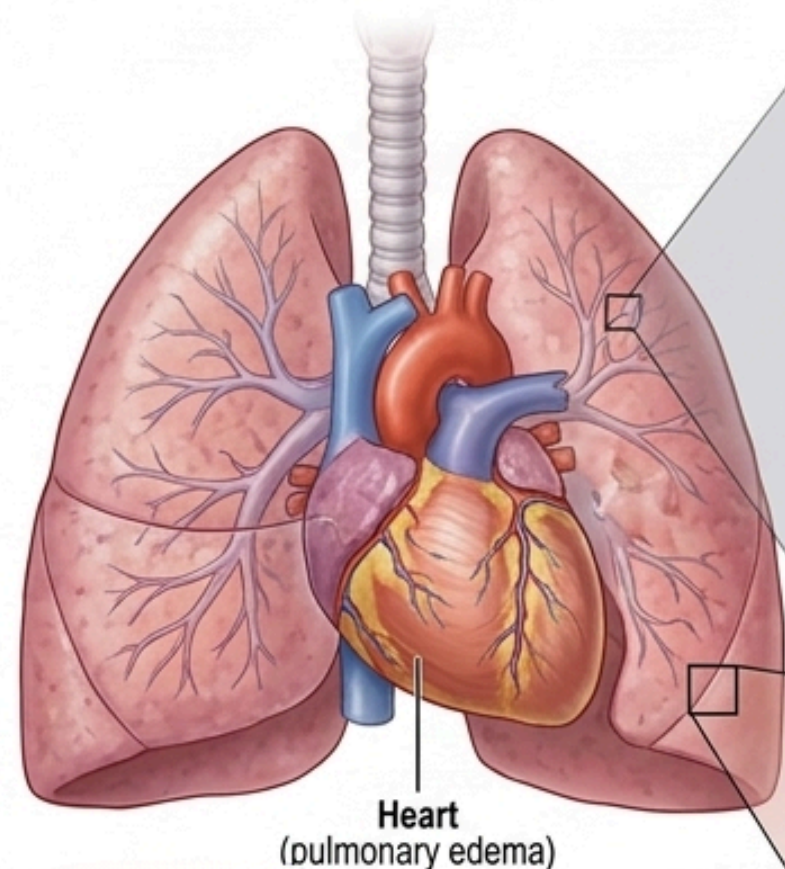
#Radiology #FOAMed #FOAMrad
#Lungfibrosis



6 7 73 9.7K



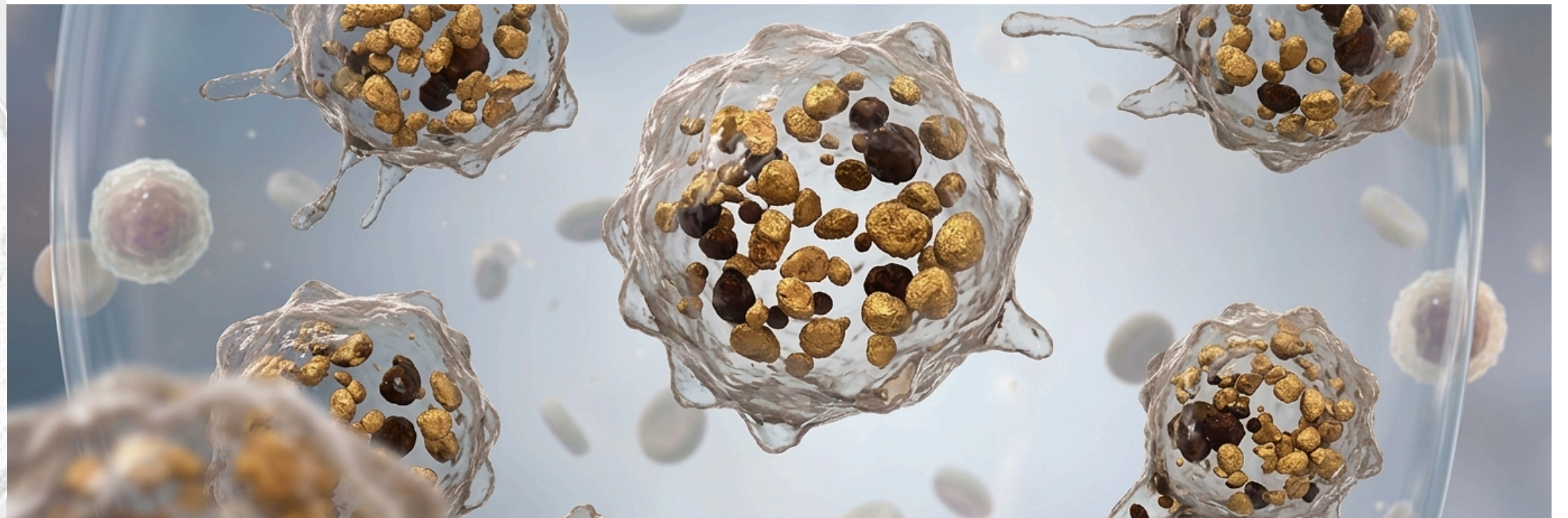
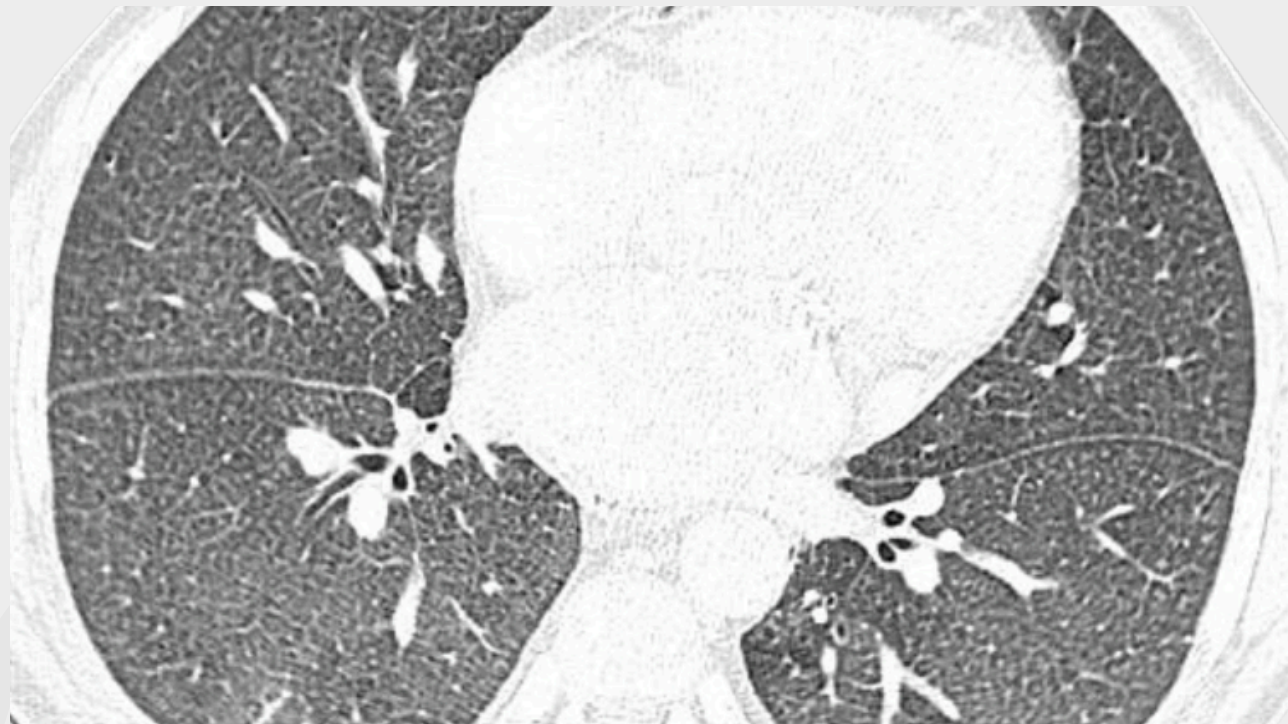
PATHOPHYSIOLOGY OF PULMONARY HEMOSIDEROSIS SECONDARY TO CARIOGENIC EDEMA

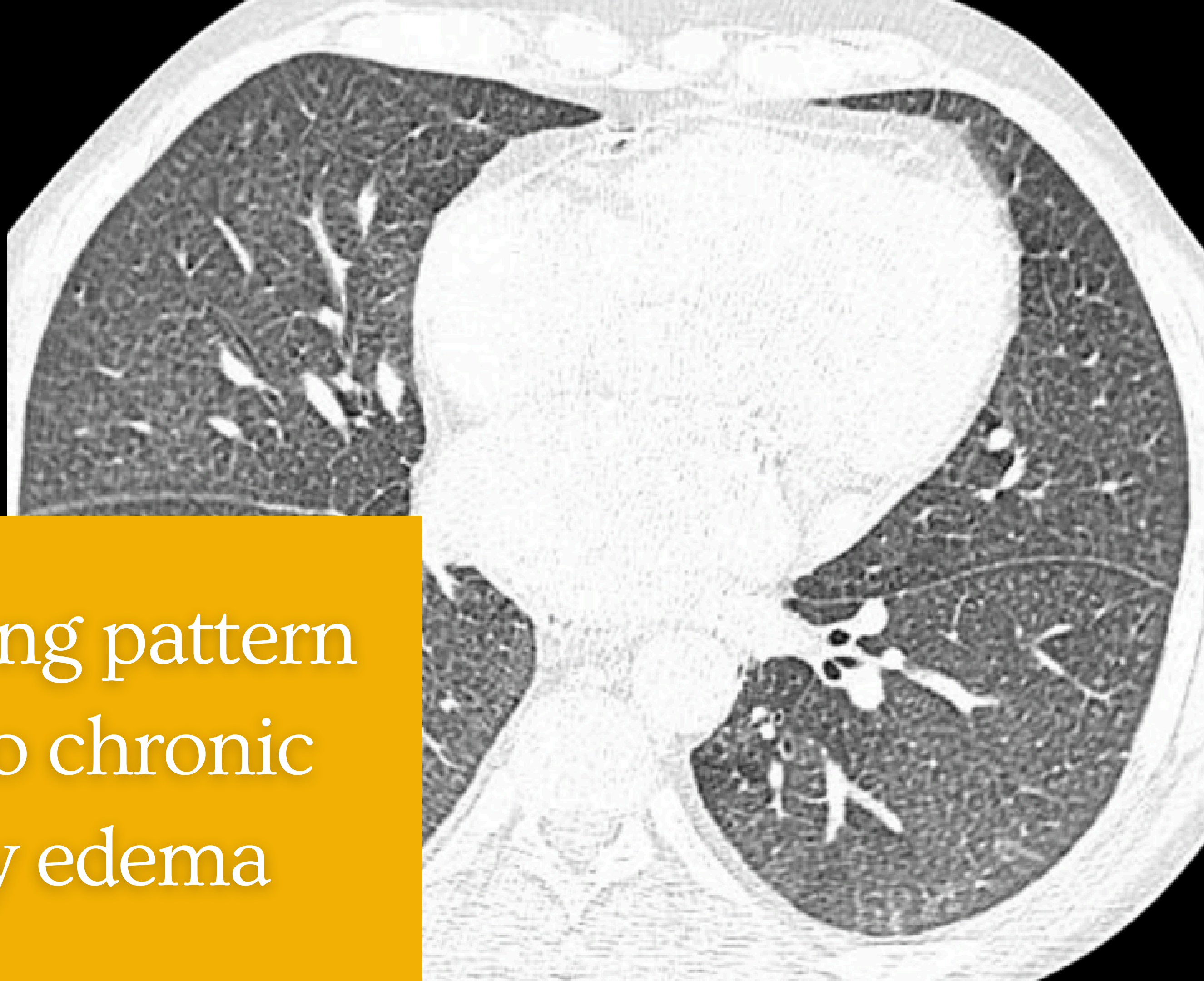


What helped narrow the differential

Key clue:

- **Hemosiderin-laden macrophages** on bronchoalveolar lavage





Interstitial lung pattern
secondary to chronic
pulmonary edema

Teaching points



START WITH PATTERN RECOGNITION

1 Careful identification of the imaging pattern is essential. Evaluate its main characteristics, including distribution because these features are key to building an appropriate differential diagnosis

LOOK FOR ANCILLARY FINDINGS THAT HELP NARROW THE DIFFERENTIAL

2 Associated findings may be crucial for interpretation. In this case, cardiomegaly, splenomegaly, and the history of congestive heart failure were important clues that supported the diagnosis

MULTIDISCIPLINARY CORRELATION IS FUNDAMENTAL

3 Correlation of imaging findings with the clinical history, symptoms, and additional results—such as bronchoalveolar lavage findings in this case—is essential to reach the final diagnosis and to guide further diagnostic decisions when needed

The End!



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