

Interstitial Lung Disease

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Case 1

History

24-year-old female patient with a history of Asthma, presented with worsening control. CT Chest (Image 1A) shows bilateral diffuse reticular and nodular opacities, consistent with fibrosis.

Anti-nuclear antibody positive with positive Anti-SCL. Pulmonary function test showed restrictive lung pattern. She was diagnosed with Systemic Sclerosis with Interstitial Lung Disease.

CT Chest (Image 1B) was performed 9 months later and her condition remained stable on treatment.

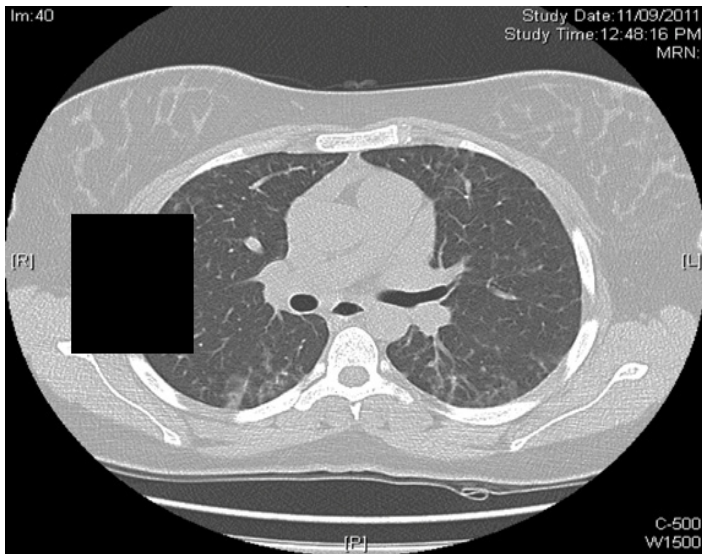


Figure 1A. High resolution CT Chest Sept 2011 showing bilateral fibrosis mainly lower lobes

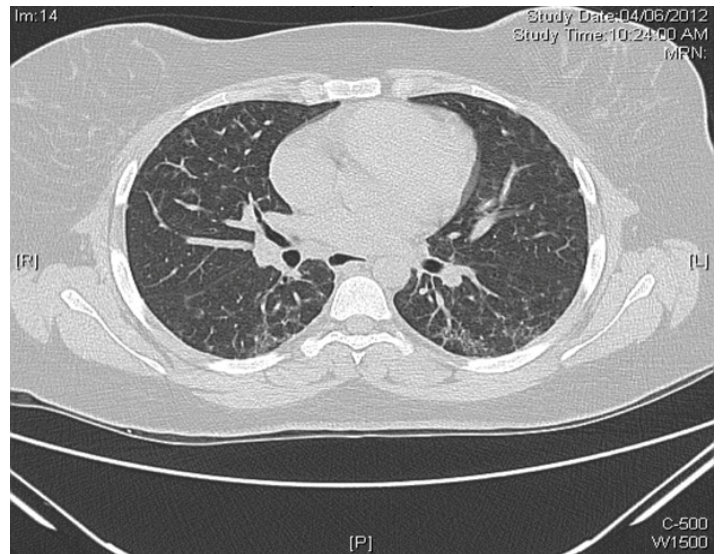


Figure 1B. High resolution CT Chest June 2012 showing unchanged lung fibrosis

Case 2

History

This is the case of a 69-year-old female patient who presented in February 2012 with cough and shortness of breath. She also reported pain in her knees and wrists for over 10 years associated with early morning stiffness lasting 30-60 minutes and she had Raynaud's Phenomena symptoms. Pulmonary function tests showed mild restrictive pulmonary disease. Anti-nuclear antibody

was positive, speckled pattern with a titer of 1:2560. Anti-RNP (1,864.8 u/ml) and Anti-smith antibodies (71.2 u/ml) were positive, as was the rheumatoid factor (87.8). She was diagnosed with interstitial lung disease secondary to Mixed Connective Tissue Disorder (MCTD).

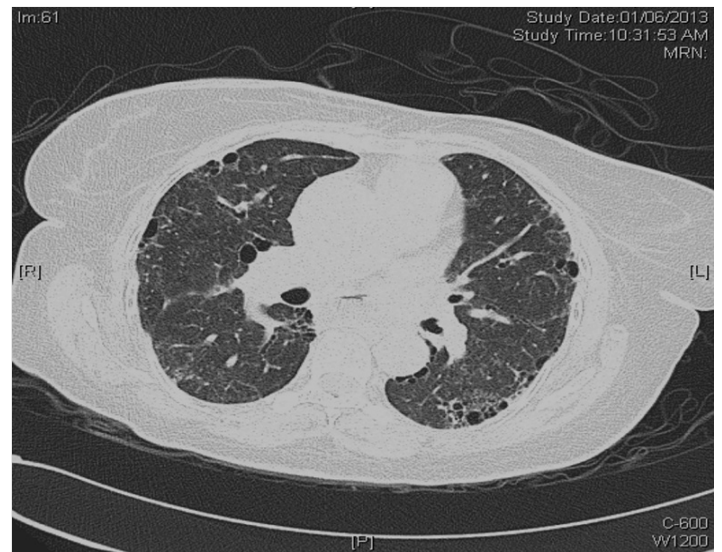
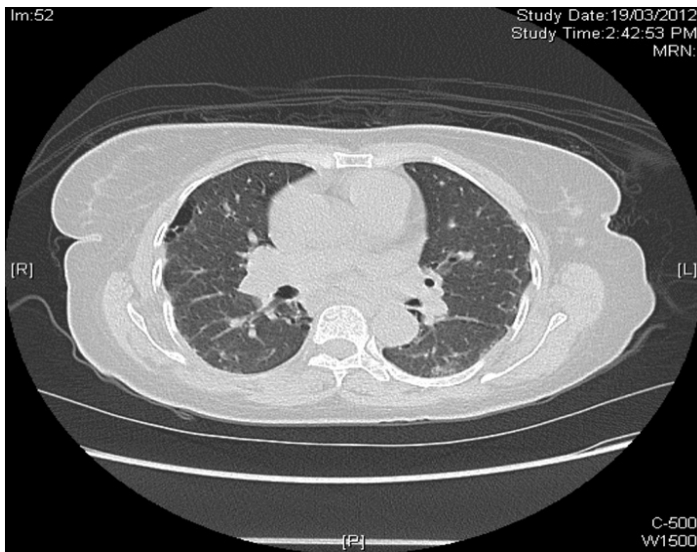


Figure 2A. High resolution CT Chest, March 2012 showing bilateral fibrocystic changes lower lobes and cysts in the peripheries.

Figure 2B. High resolution CT Chest June 2013 showing stable lung fibrotic changes

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