RADIOLOGICAL SIGNS OF NON-SPECIFIC INTERSTITIAL PNEUMONIA

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Introduction. Currently, about two hundred diseases with signs of interstitial lung diseases have been identified, which is about 20% of all lung diseases, with half of them being of unclear origin [1].

Objective: to identify radiographic changes in non-specific interstitial pneumonia.

Material and methods of the study. A retrospective analysis of the case histories of 200 patients with non-specific interstitial pneumonia (NIP) was conducted. All patients underwent general clinical standards of research according to ICD-10, in addition, all underwent high-resolution X-ray and computed tomography images.

Results and discussion. In 26 patients, X-ray examination revealed increased lung roots on both sides, stringiness, and decreased local transparency. In 30 patients, along with increased roots, decreased transparency of both lungs was found, similar to bilateral pneumonia. In 27 patients, general X-ray signs characteristic of chronic obstructive bronchitis were found. CT revealed typical signs of nonspecific interstitial pneumonia, including decreased transparency of the lung tissue, such as "ground glass", traction bronchiectasis and bronchioloectasis, thickening of the interlobular septa, decreased volume of the lower lobes, and (often, but not always) "honeycomb lung" [2].

Possible findings in patients with NIP include consolidation foci. This symptom may reflect the simultaneous presence of organizing pneumonia, with which NIP overlapped in 50% of patients in one study. The course of the pathology may be accompanied by periods of increased clinical symptoms, usually taken as an exacerbation of NIP. During this period, CT shows expanded "ground glass" zones and new consolidation areas. The presence of symmetrical thin subpleural stripes of preserved lung tissue (subpleural sparing) was noted, followed by reticular and inflammatory changes.

Conclusions. Radiological studies using HRCT technologies indicate that patients with nonspecific interstitial pneumonia are characterized by the

predominance of "ground glass" and the absence of "honeycomb lung" in the cellular subtype, and in the fibrous or mixed subtype, all four main radiological syndromes are expressed to varying degrees simultaneously, as well as (often, but not always) "honeycomb lung". Also characteristic is the presence of symmetrical thin subpleural stripes of preserved lung tissue, followed by reticular and inflammatory changes.

References:

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