Annals of Clinical Case Reports

Clinical Image
Published: 21 Feb, 2022

Combined Sarcoidosis and Idiopathic Pulmonary Fibrosis (CSIPF): Coincidence, Association or Mimicry?

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Clinical Image

A 70-year old patient with longstanding history of sarcoidosis (initially ATS- stage II), presented with progressive dyspnea and dry cough. Although corticosteroid therapy initially improved lung function, a decline (Figure 1) was observed. Thoracic CT-scan was compatible with definite unusual interstitial pneumonia potentially engrafted on the preexisting sarcoidosis. After multidisciplinary discussion antifibrotic therapy with Nintedanib was started. Lung function and fibrosis on the CT-scan improved (Figure 1, 2). Collins et al. [1] found a series of cases and coined the term "Combined Sarcoidosis and Idiopathic Pulmonary Fibrosis CSIPF". IPF is defined as fibrosis without inflammation and sarcoidosis as a multisystem chronic inflammatory condition – these

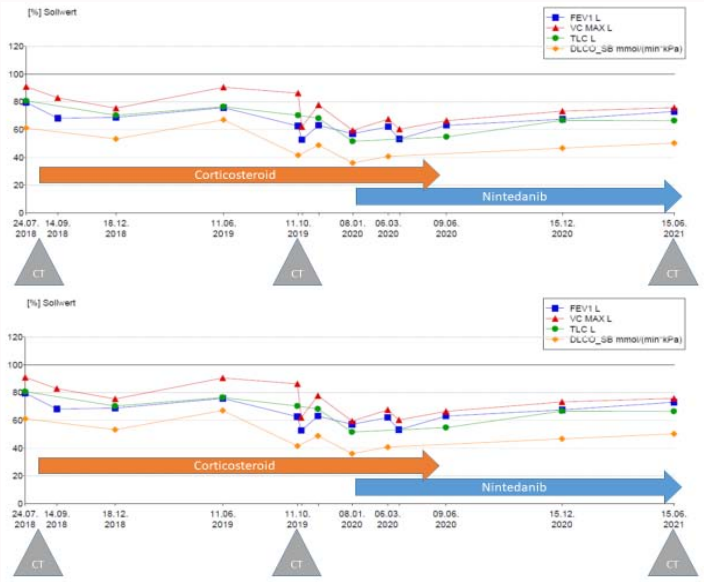

Figure 1: Lung function revealing a progressive restrictive ventilatory defect and reduced diffusion capacity improving after antifibrotic therapy with nintedanib.

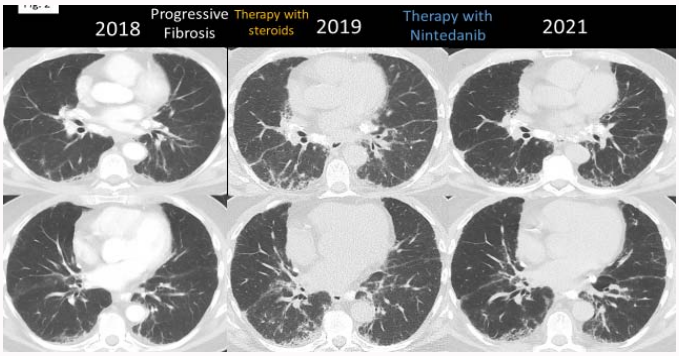

Figure 2: Calcified and enlarged hilomediastinal lymph nodes alongside with progressive basal and subpleural fibrosis between 2018 and 2019. Improvement of the progressive fibrosis after antifibrotic therapy in 2021.

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Received Date: *25 Jan 2022*
Accepted Date: *14 Feb 2022*
Published Date: *21 Feb 2022*

Citation:
Nussberger G, Kluckert T, Brutsche M. Combined Sarcoidosis and Idiopathic Pulmonary Fibrosis (CSIPF): Coincidence, Association or Mimicry?. Ann Clin Case Rep. 2022; 7: 2129.

ISSN: 2474-1655

supposedly being two distinct entities [2,3]. Did we experience coincidence, association or mimicry between these two entities? Lucky enough antifibrotic treatments is also licensed for progressive non-IPF fibrotic lung diseases.

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