

Introduction Idiopathic Pulmonary Fibrosis (IPF) is defined as a specific form of chronic fibrosing interstitial pneumonia limited to the lung and associated with the histologic appearance of usual interstitial pneumonia (UIP) on surgical (thoracoscopic or open) lung biopsy. The precise incidence and prevalence of IPF are not known. High-resolution CT scanning has changed the diagnostic assessment (2) toxins, environmental exposures, and collagen vascular disorders, (3) donum characteristics on conventional chest or high-resolution computed tomography (HRCT) scans, (4) abnormal lung function studies showing restriction (decreased total lung capacity [TLC], or decreased vital capacity [VC] with normal or increased FEV1/FVC ratio) and/or impaired gas exchange (alveolar arterial pressure difference of 02), decreased PaO2 with rest or exercise. GGO should be considered an active process only when there are no HRCT findings associated with fibrosis.

Discussion Several acute and chronic lung disorders with varying degrees of pneumonia and fibrosis are collectively referred to as interstitial lung diseases (ILDs). Results The following high-resolution CT findings were noted: predominance of peripheral (100%) and inferior (80%) lesion distribution, evidence of intralobular septal thickening (100%), lymphangiectasia (90%), bronchiectasis (90%), and visceral tissue distortion (100%). Surgical lung biopsy is essential for a definitive clinical-pathological diagnosis except in cases where a typical radiographic clinical picture of heterogeneous interstitial pneumonia/pulmonary fibrosis is present. All images were obtained in suspended inspiration in supine position using 2mm collimation at 10mm interval from apex to the base of the lung at 120 kVp, 45 mA with 2sec exposure time and reconstructed with a bone algorithm. Patients with idiopathic pulmonary fibrosis (IPF) usually present between the ages of 40 and 70 years, and typically present with progressive dyspnea on exertion, chronic cough and dactylism in approximately two-thirds of IPF patients. The most common radiographic finding in idiopathic pulmonary fibrosis, described in approximately 80% of patients, consists of bilateral irregular linear opacities that form a reticular pattern. Conversely, a normal chest radiograph cannot be used to exclude microscopic evidence of UIP on lung biopsy.

Materials & Methods A prospective study of ten patients with IPF was done. In individuals with such asymptomatic abnormalities, investigation by physiologic evaluation or by high-resolution CT in diagnosis and management of idiopathic pulm... The earliest histological abnormality in idiopathic pulmonary fibrosis is alveolitis with increased cellularity of the alveolar walls. Furthermore, it has been repeatedly shown that the severity and extent of disease assessed on chest radiograph do not correlate well with functional and clinical impairment. All patients underwent HRCT (TOMOSCAN-EG, PHILIPS, BEST, NETHERLANDS) examination.