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A Case of Idiopathic Pulmonary Fibrosis with Different Radiological Involvement and Slow Course

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Objectives: Idiopathic Pulmonary Fibrosis (IPF) is a chronic disease with unknown etiology, progressive and fibrosis. IPF is the most common type of idiopathic interstitial pneumonia. Only 20-30% of patients survive in the five years following diagnosis. The clinical course is highly variable. Some patients may experience rapid deterioration while others may show a slower course. In some patients, acute attacks may occur while a stable course is observed.

Case Presentation: The patient had complaints for the last 5 years and had increased for the last 6 months. 35 pack/year smoked, 12 years of exsmoker. Job; truck driver. On physical examination, there were velcro rales in the lower right area and clubbing finger. 3 years ago was feeding a parakeet for a short time. Other than that, he did not deal with livestock or farming. He never used feather pillows or quilts. The patientıs thoracic CT scan in 2013 showed changes in favor of predominantly interstitial lung diseases. In 2018, thoracic CT scan revealed basal-peripheral weighted interstitial lung disease (IPF?) In both lungs. Collagen tissue panel (ANA, ENA and RF) was negative. No rheumatologic disease was detected by the rheumatology clinic. There wasnıt a drug he used all the time. In respiratory function tests performed in 2016, a decrease of 11% in FVC and a 30% decrease in DLCO was observed. The patient underwent a biopsy by open lung method and histopathologically detected the usual interstitial pneumonia.

Conclusion: Although IPF is insidious during the initial phase, it is progressive and has a high mortality if it is not treated. The clinical course may be unpredictable slow or rapid course. We would like to share an interesting case of IPF, which is characterized by atypical localization of fibrosis with slow course.

Keywords: Idiopathic fibrosis, interstitial, usual pneumonia