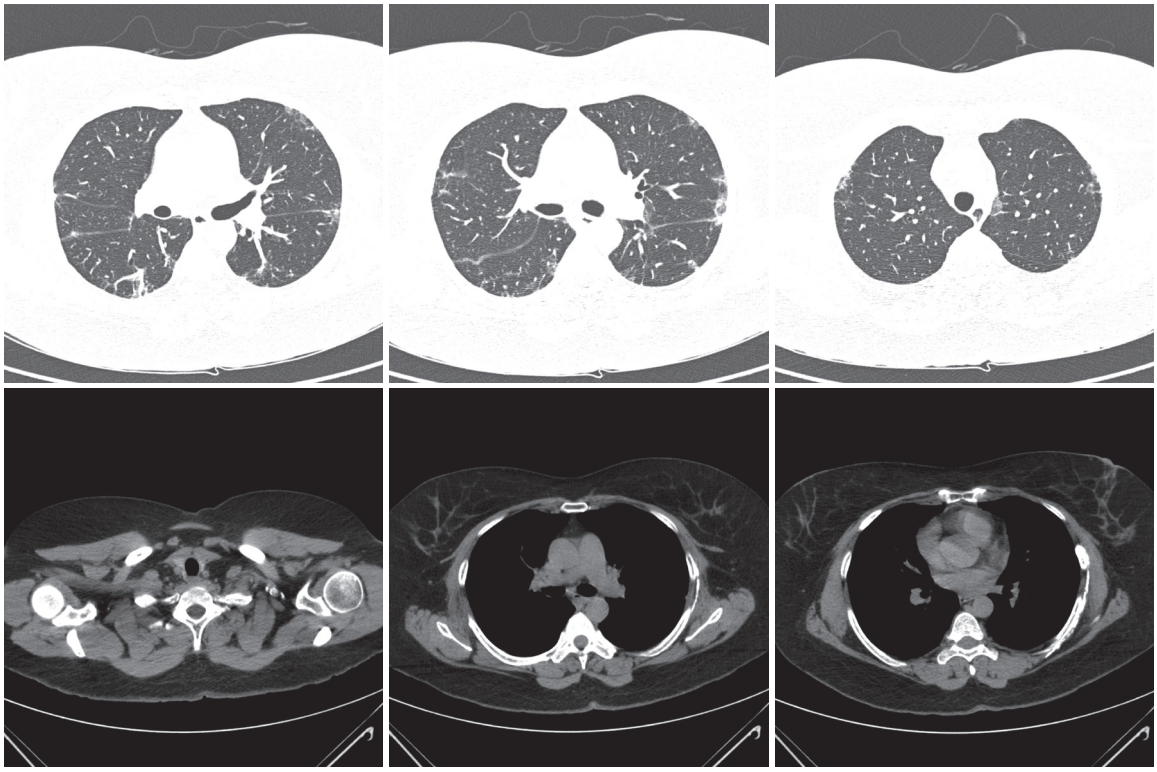
Radiological Diagnosis

Diagnosis of the case presented in the previous edition

J Bras Pneumol. 2007;33(3):362

Polymyositis associated with bronchiolitis obliterans organizing pneumonia



A female patient with history of chronic muscle weakness who has been experiencing fever, dyspnea on exertion, and dry cough for 3 weeks.

Comments

Clinical and laboratory findings confirmed the diagnosis of anti-Jo-1 antibody positive polymyositis, and the transbronchial biopsy correlated with bronchiolitis obliterans organizing pneumonia (BOOP).

In the illustrative images of this case, this diagnostic hypothesis can be formulated based on the findings of muscle calcification (left intercostal), which correlate with chronic polymyositis, associated with the presence of consolidations and peripheral bilateral ground-glass opacities which, in this context, suggest BOOP.

Pulmonary involvement in inflammatory myositis is common and can result from fatigue of thoracic muscles secondary to the use of medications or accompanying interstitial lung disease.

Interstitial lung disease as primary involvement can be detected in 5 to 30% of the patients with polymyositis, and BOOP, usual interstitial pneumonia, nonspecific interstitial pneumonia, and diffuse alveolar disease are the most common patterns. The identification of BOOP accompanied by dermatopolymyositis is made simultaneously or after the diagnosis of myositis in most cases, and it rarely precedes the muscle profile.

Dany Jasinowodolinski,
Gustavo de Souza Portes Meirelles,
Nestor L Müller

Fleury Center for Diagnostic Medicine, São Paulo, Brazil; Universidade Federal de São Paulo – UNIFESP, Federal University of São Paulo - São Paulo, Brazil; University of British Columbia – Vancouver, BC, Canada

References

1. Tazelaar HD, Viggiano RW, Pickersgill J, Colby TV. Interstitial lung disease in polymyositis and dermatomyositis. Clinical features and prognosis as correlated with histologic findings. Am Rev Respir Dis. 1990;141(3):727-33.
2. Nascimento AP, Abreu AC, Diógenes AM, Neto ML, Gonçalves RC, Borba EF. Bronquiolite obliterante com pneumonia em organização (BOOP) precedendo o diagnóstico de polimiosite: relato de caso e revisão de literatura. Rev Bras Reumatol. 2000;40(3):149-152.
4. Kim EA, Lee KS, Johkoh T, Kim TS, Suh GY, Kwon OJ et al. Interstitial lung diseases associated with collagen vascular diseases: radiologic and histopathologic findings. Radiographics. 2002;22 Spec No:S151-S165.
5. Akira M, Hara H, Sakatani M. Interstitial lung disease in association with polymyositis-dermatomyositis: long-term follow-up CT evaluation in seven patients. Radiology. 1999;210(2):333-8.

Readers correctly diagnosing the case presented in the May/June 2007 issue:

Eric Loures de Souza – Universidade Federal Fluminense – Niterói - RJ
Elza Maria Rezende de Almeida – Centro de Saúde da Policia Militar – Macapá - AP
Bruno Hochhegger – Santa Casa de Porto Alegre – Porto Alegre - RS
Jaquelina Sonoe Ota Arakaki – Universidade Federal de São Paulo – São Paulo - SP
Ricardo Domingos Delduque – Hospital Padre Albino – Catanduva - SP
Christiano Perin – Hospital de Clínicas de Porto Alegre – Porto Alegre - RS