

Sarcoidosis

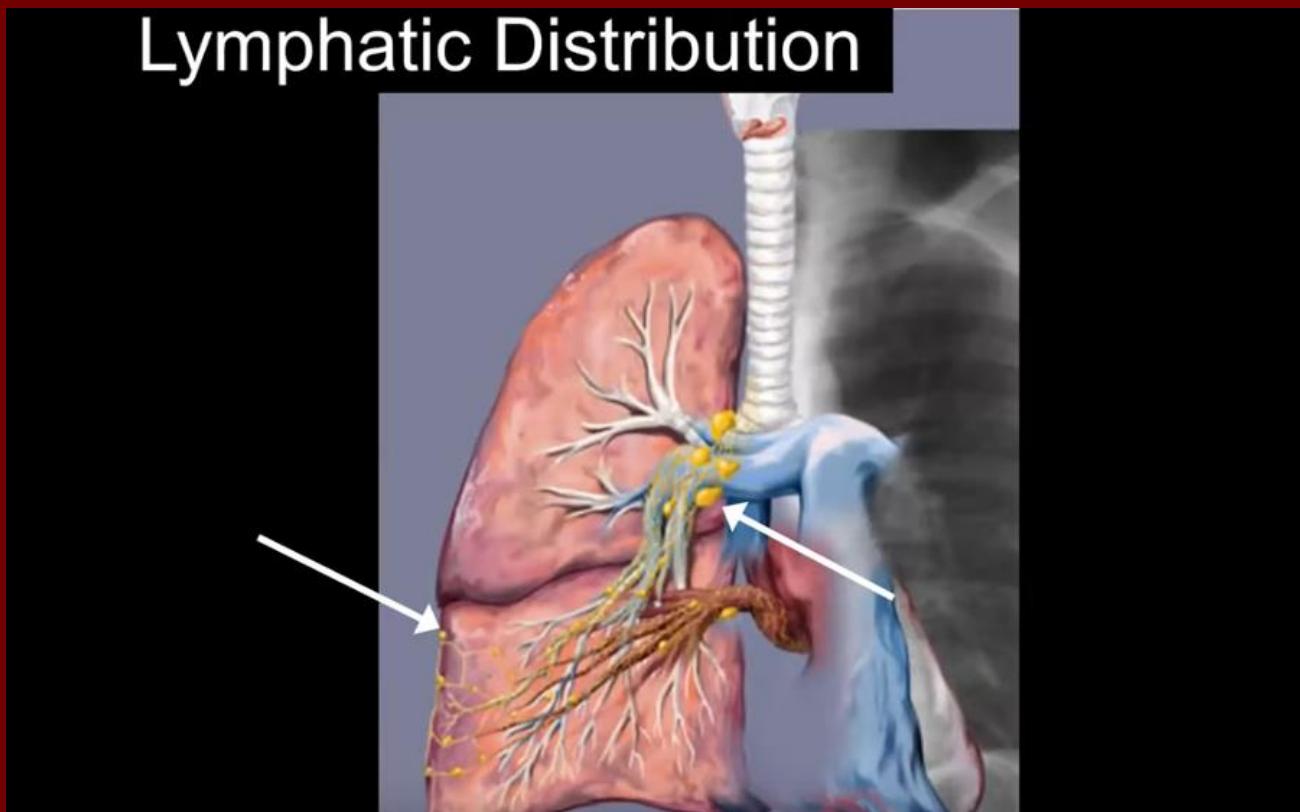
- **Pulmonary and mediastinal involvement of sarcoidosis** is extremely common and is seen in over 90% of patients.
- Most commonly affects patients between 20 and 40 years of age although it is seen essentially at any age.
- Slight female predominance, particularly among African-Americans and it is rare in Asians.

CT

- Bilateral hilar lymphadenopathy and right paratracheal lymphadenopathy in up to 95% of patients
- Bilateral perilymphatic micronodules (75-90%)
- Pulmonary nodules and masses (20%)
- Solitary nodule or mass (rare)
- Alveolar opacities (10-20%)
- Ground-glass opacities (40%)
- Pulmonary fibrosis (20%)
 - Upper lobe-predominant reticular opacities, traction bronchiectasis, architectural distortion, volume loss

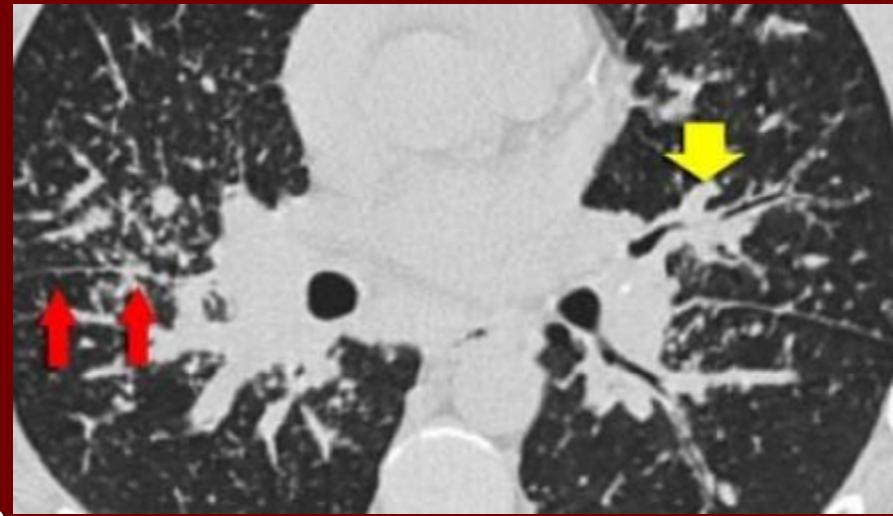
Perilymphatic

■ Sarcoid!

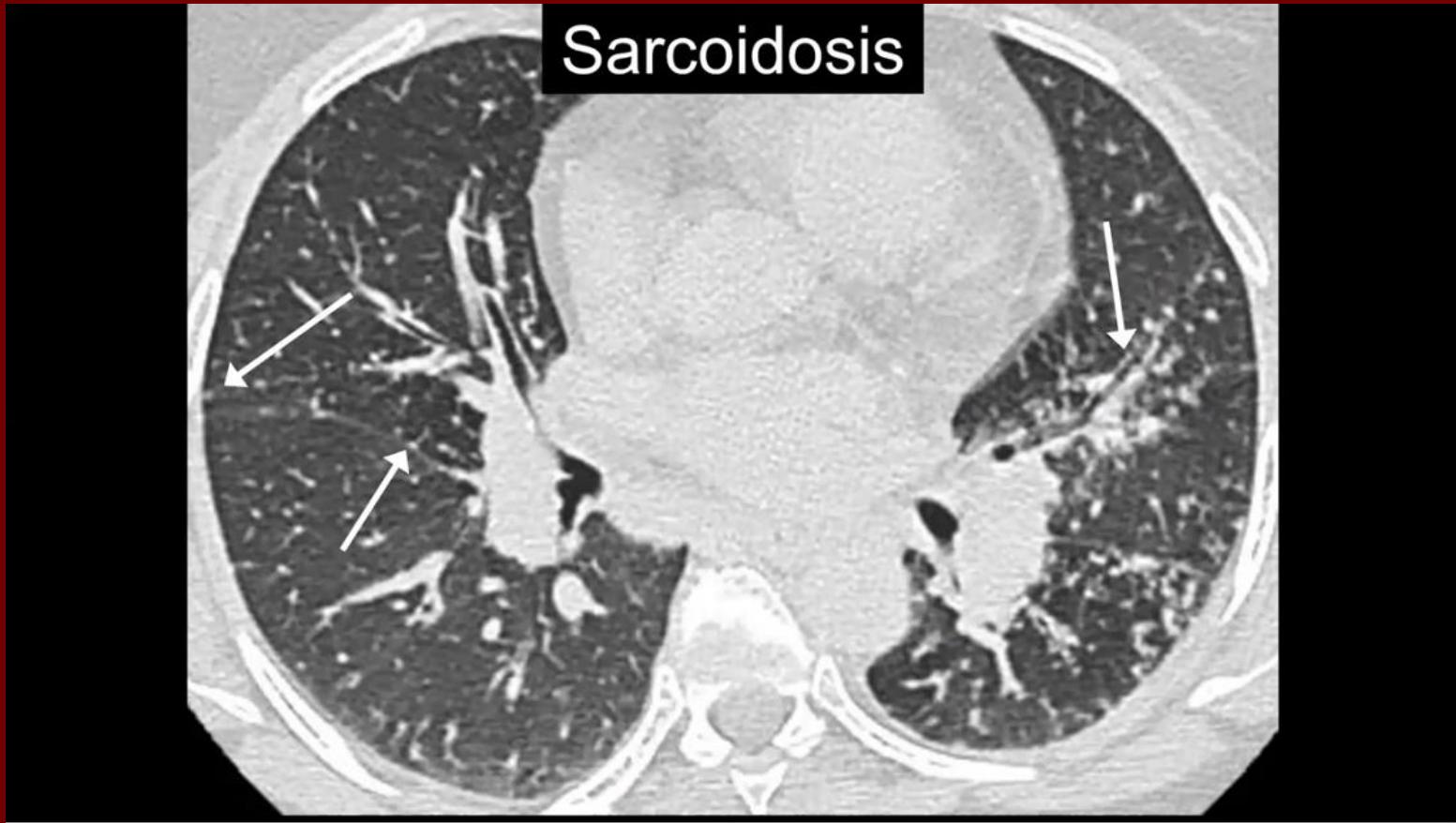


Sarcoidosis (perilymphatic distribution)

- Notice the nodules along the fissures indicating a perilymphatic distribution (red arrows).
- Always look carefully for these nodules in the subpleural region and along the fissures, because this finding is very specific for sarcoidosis.
- Typically in sarcoidosis is an upper lobe and perihilar predominance and in this case we see the majority of nodules located along the bronchovascular bundle (yellow arrow).



Sarcoid

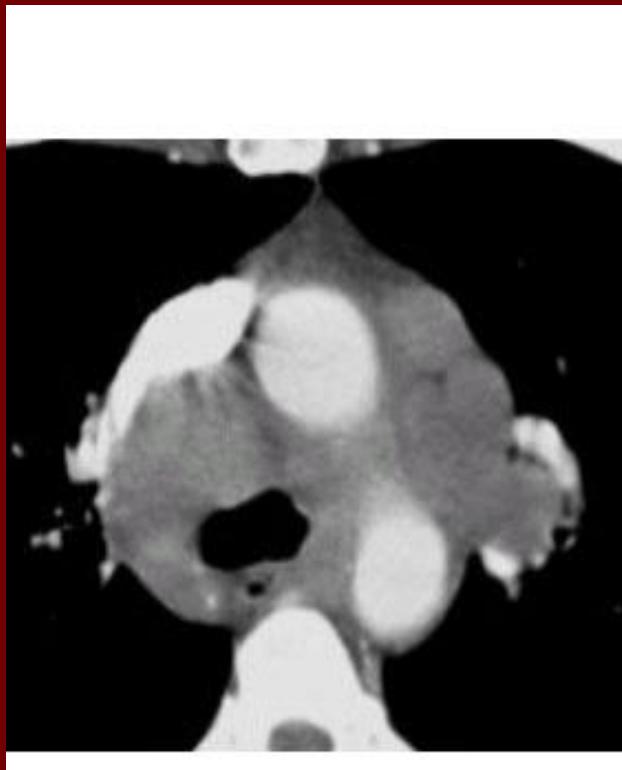


Sarcoidosis



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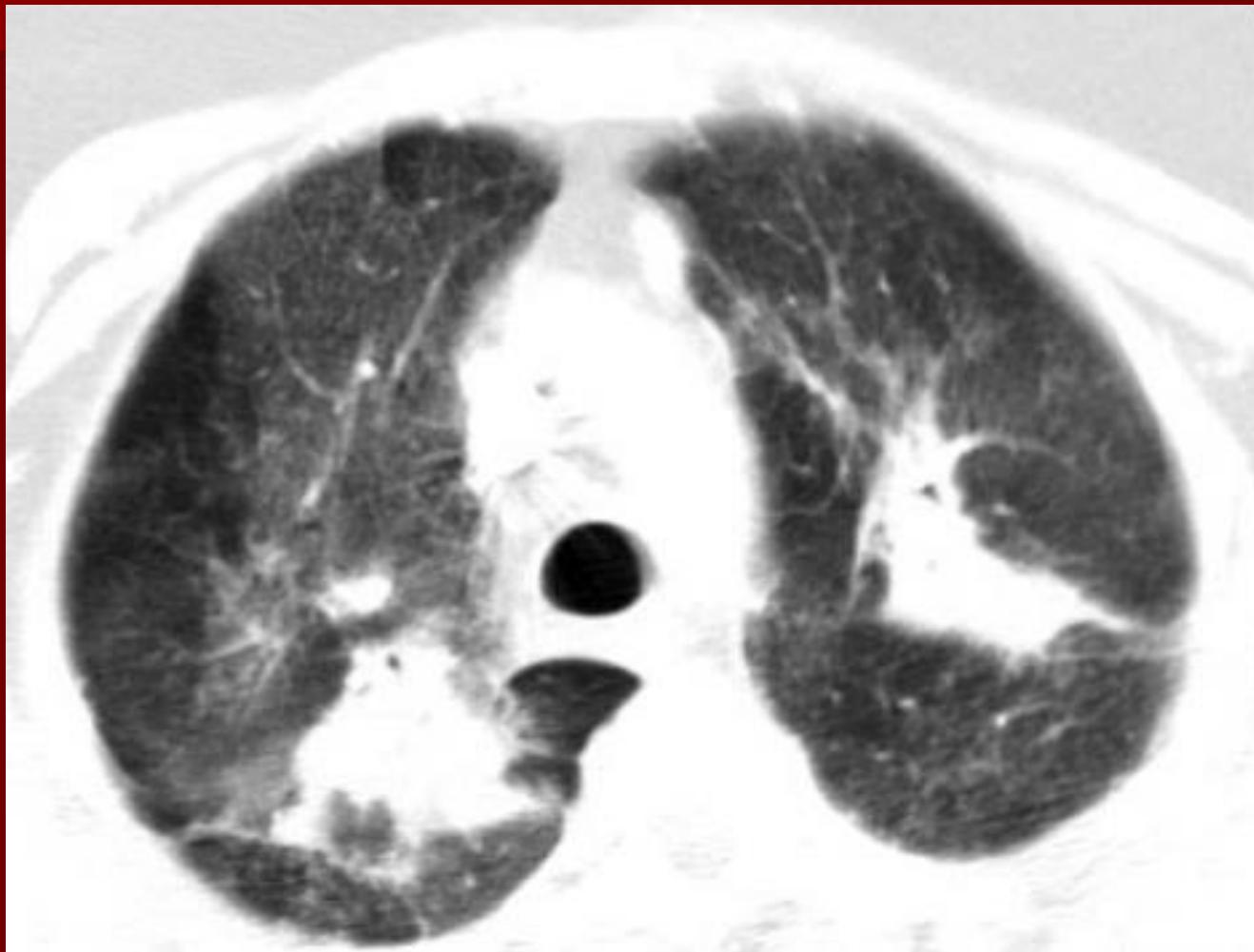
Sarcoidosis, parenchymal (alveolar) form, mimics mets



Stages of Sarcoid

- **stage 0:** normal chest radiograph
 - 5-10% of patients at presentation
- **stage I:** hilar or mediastinal nodal enlargement only
 - 45-65% of patients at presentation
 - 60% go onto complete resolution
- **stage II:** nodal enlargement and parenchymal disease
 - 25-30% of patients at presentation
- **stage III:** parenchymal disease only
 - 15% of patients at presentation
- **stage IV:** end-stage lung (pulmonary fibrosis)

Sarcoid with Progressive massive fibrosis.
Similar to **silicosis** and severe **histoplasmosis**



Differential Dx:

- **Differential Dx:** (Nodularity of the fissures has a relatively limited differential diagnosis).
 - Sarcoidosis
 - Lymphangitic carcinomatosis
 - Less frequently:
 - Lymphoma
 - Silicosis