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	Autore	Marcoff, Marco G.
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2.	Record Nr.	UNINA9911007465103321
	Autore	Churg Andrew
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General Approach to Interstitial Lung Disease: Clinical, Radiologic, and Pathologic Considerations -- Imaging in Interstitial Lung Disease -- Biopsy Choices and Handling in Interstitial Lung Disease -- Acute Interstitial Pneumonia (AIP) -- Organizing Pneumonia (OP) -- Usual Interstitial Pneumonia (UIP) -- Nonspecific Interstitial Pneumonia (NSIP) -- Respiratory Bronchiolitis with Interstitial Lung Disease (RBILD), Smoking-Related Interstitial Fibrosis (SRIF), and Desquamative Interstitial Pneumonia (DIP) -- Combined Pulmonary Fibrosis with Emphysema -- Langerhans Cell Histiocytosis -- Introduction to Granulomatous Forms of Interstitial Lung Disease -- Hypersensitivity Pneumonitis -- Sarcoid -- Miscellaneous Granulomatous Forms of Interstitial Lung Disease -- Eosinophilic Pneumonias -- Pulmonary Alveolar Proteinosis -- Lymphangioleiomyomatosis -- Drug Reactions Producing Interstitial Lung Disease -- Lymphoid and Hematopoietic Processes Producing a Pattern of Interstitial Lung Disease -- Bronchiolitis -- Interstitial Lung Disease in Patients with Connective tissue Diseases and Interstitial Pneumonias with Autoimmune Features -- Pneumoconioses Producing a Pattern of Interstitial Lung Disease -- Mimics of Interstitial Lung Disease.

Sommario/riassunto

This objective of this atlas is to serve as an updated diagnostic resource that allows pathologists to diagnose interstitial lung disease (ILD) when they encounter it in biopsies. Pathologists often struggle in this area due to the numerous different and sometimes overlapping entities encompassed by term "ILD". ILD pathology is unique in that diagnostic accuracy always requires correlation with the clinical and particularly the radiologic findings. This is different from most areas of pathology in which only minimal clinical/radiologic information will allow an accurate diagnosis. By including CT findings, pathologists will know what to look for in radiology reports or when talking with radiologists. A further recent development has been the increasingly widespread use of transbronchial cryobiopsy for diagnosing interstitial lung disease. What is becoming evident, however, is that there is astonishingly little in the way of pathologic guidance for making diagnoses with cryobiopsies, and pathologists struggle with them. Advances in understanding the genetics of ILD have led to realization that there are major overlaps in the genetic abnormalities associated with a UIP pattern, even if the underlying disease is fibrotic hypersensitivity pneumonitis or connective tissue disease. A new idea is that of telomeropathy; i.e. the finding that patients with short telomeres are particularly likely to develop fibrotic lung disease, and, most importantly, should not be treated with immunosuppressive agents. Atlas of Interstitial Lung Disease: Pathology with High Resolution CT Correlations 3rd Edition is primarily directed toward non-expert pathologists who encounter interstitial lung disease specimens, as well as radiologists who want some understanding of the pathologic basis for the imaging findings. The book incorporates current clinical/radiological/pathologic guidelines and provides information on how to apply them to biopsy specimens.
