

# **Hypersensitivity Pneumonitis**



PLAY PICMONIC

### Farmer's Lung

Farmer and Lungs

#### Pigeon Breeder's Lung

Pigeons and Lungs

Another type of hypersensitivity pneumonitis is pigeon breeder's lung. As its name implies, this type arises in patients who are in contact with pigeons. <br/> <br/>br>-Other common triggers are coffee bean dust, moldy sugar cane, and bacterial spores from hot tubs. <br/> <br/> tubs. <br/> <br/> try-Other common triggers are coffee bean dust, moldy sugar cane, and bacterial spores from hot tubs. <br/> <br/> tubs. <br/> <br/> try-Other common triggers are coffee bean dust, moldy sugar cane, and bacterial spores from hot tubs. <br/> <br/> tubs. <br/> tubs. <br/> <br/> tubs. <br/> tub

#### Malt Worker's Lung

Bob-Barley and Malt

# **CLINICAL PRESENTATION**

## **Acute: Type III Hypersensitivity**

Acute-angle (3) Tree Hiker-sensitive-crying

Hypersensitivity pneumonitis can be acute or chronic. Acute hypersensitivity pneumonitis is caused by a type III hypersensitivity reaction to a trigger. It usually occurs because of intermittent, brief exposures to high doses of the trigger in question. <br/>br>As exposure begins, the allergen is picked up in the lungs by dendritic cells that travel to the lymph nodes and present it to Th1 cells. Th1 cells activate B cells which become plasmocytes that produce antibodies and form complexes with the antigen. These, in turn, deposit in the basement membrane of the pulmonary capillaries. <br/>
br>As this occurs, the complement system is activated and neutrophils, the predominant cell, degranulate, causing inflammation and necrosis of capillaries and alveoli.<br/>
br>Acute hypersensitivity pneumonitis usually occurs 4-8 hours after exposure.

#### Chronic: Type IV Hypersensitivity

Crone and (4) Fork with Hiker-sensitive-crying

# Fever

Fever-beaver

Fever is a common finding in patients with acute forms of hypersensitivity pneumonitis. It is absent in chronic forms.

### **Dyspnea and Cough**

Disc-p-lungs and Coughing-coffee-pot

Dyspnea and cough are common in both acute and chronic presentations and can be accompanied by tachypnea and crackles.

### DIAGNOSIS



#### **Ground-Glass Opacifications with Honeycombing**

Broken-glass Opacities on the Ground and Honeycomb

#### **Restrictive Pattern**

Restrictive-belt on Lungs

#### **Inhalation Challenge**

Inhaler with Sword

A study that can be performed for diagnosis is the inhalation challenge, a test in which the patient is exposed to the suspected trigger of the disease and monitored for a response.

#### TREATMENT

### Remove the Trigger

No-Sign on Trigger

### Glucocorticoids

Glue-quarter-on-steroids

In severe cases of hypersensitivity pneumonitis, glucocorticoids can be used. If it is chronic, glucocorticoids are used, reducing the dose until the minimum effective dose is achieved. <br/>