Preface

Introduction

Interstitial lung diseases, taken together, comprise a significant component of any respiratory medicine clinician’s practice. This has been a rapidly changing field, with the emergence of new diagnostic techniques and therapies. In 2004, we edited the first edition of “Diffuse Lung Disease: a practical approach.” In this second edition, we are not only updating what was presented in the first edition, but also providing information about many exciting new advances that have been made in many of this complex group of diseases over the last 7 years. The overall goal of this book remains the same – to provide the reader with clear and specific recommendations regarding the management of all forms of interstitial lung disease. These recommendations are provided by a group of physicians who are all experts in the areas on which they are contributing.

The book is divided into two major sections. The first section deals with general aspects of diagnosis and management of interstitial lung disease, including: the clinician’s approach to patient evaluation (Myers and Raghu); the radiologist’s approach to thoracic imaging with a major focus on the role of the high-resolution CT scan (Lynch); the added value of bronchoalveolar lavage (Drent and Linssen); a review of the histopathology of the various interstitial lung diseases (Colby and Leslie); a detailed review of the physiological changes produced by the various interstitial lung diseases including guidelines on what to monitor over time (Wells, Ward, and Cramer); the approach to classification and evaluation assimilating all aspects of clinical, radiographic and histopathologic information into a multidisciplinary process (Collard and King); a summary of the various treatments used for interstitial lung diseases, including suggested dosage, monitoring, and toxicity (Baughman, Costabel, and Lower); and the impact of pulmonary hypertension on interstitial lung diseases (Shlobin and Nathan).

The second section of the book deals with specific interstitial lung diseases: sarcoidosis, including extrapulmonary disease (Culver and Judson); the diagnosis, management, and outcome of idiopathic pulmonary fibrosis in which disease the most major advances have occurred over the last decade (Lynch and Belperio); the complexities of the diagnosis and management of nonspecific interstitial pneumonia including the similarities with but the quite different outcome from idiopathic pulmonary fibrosis (Flaherty and Martinez);
emerging understanding of collagen vascular-associated interstitial lung diseases, including the “grey” areas of subclinical disease (Fischer and du Bois); hypersensitivity pneumonitis (Selman, Mejia, Ortega, and Navarro); the impact of cigarette smoke on, and its interrelationship with interstitial lung disease (Solomon and Brown); the childhood interstitial lung diseases, in many of which the specific gene abnormality has been identified about which guidance is given regarding how and when further evaluation, including genetic testing, is appropriate (Young); an approach to the diagnosis and management of several of the rarer causes of interstitial lung disease including pulmonary alveolar proteinosis and lymphangioleiomyomatosis (Huie, Olson, Schwarz, and Frankel) an overview of occupational, environmental, and pharmaceutical causes of interstitial lung diseases (Pirozynski and Borg); the various forms of bronchiolitis, some of which are coexistent with interstitial lung disease (Cottin and Cordier); and the pulmonary vasculitides, focusing on the anti-neutrophil cytoplasmic antibody (ANCA)-associated conditions (Specks and Keogh).

All contributors were asked to provide clinician-focused practical guidance and all have keep to this goal admirably. As editors, we wish to thank them all for their hard work in the production of this practical guide to the management of interstitial lung disease. We also wish to thank Connie Walsh of Springer Science and Business Media for her help and patience in preparing this edition. Without her continuing and always friendly persistence, this volume would never have been completed!

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