

Interstitial Lung Disease Multidisciplinary Meeting Diagnostic Labels & Resources

1. Common Diagnostic Labels

We suggest that during the presentation of clinical, radiological and pathological findings, the key positive and negative findings are presented, using terms suggested by international expert bodies where possible. We suggest that specific diagnoses are applied only upon consensus discussion.

Common Diagnoses	Acronym
Idiopathic pulmonary fibrosis	IPF
Non-specific interstitial pneumonitis	NSIP
Cryptogenic organising pneumonia	COP
Desquamative interstitial pneumonia	DIP
Respiratory bronchiolitis-interstitial lung disease	RB-ILD
Pleuro-parenchymal fibroelastosis	PPFE
Lymphoid interstitial pneumonia	LIP
Acute interstitial pneumonia	AIP
Unclassifiable interstitial pneumonia, [state if provisional]	
Connective tissue disease related interstitial lung disease, [include histological subtype & connective tissue disease]	CTD-ILD
Hypersensitivity pneumonitis [acute, chronic]	[A/C]HP
Eosinophilic pneumonia [acute, chronic]	[A/C]EP
Langerhans cell histiocytosis	LCH
Pulmonary lymphangiomyomatosis	PLAM
Sarcoidosis, [specify organ involvement]	
Dust induced disease, [specify dust]	
Drug induced lung disease, [specify drug]	
Pulmonary vasculitis, [specify subtype]	
Pulmonary alveolar proteinosis	
Primary pulmonary haemosiderosis	
Primary alveolar microlithiasis	

2. Research Labels

We suggest the principal diagnosis avoids the use of terms that are currently the subject of further research and validation. Instead, those conditions should be recorded as secondary diagnoses.

Research Terminology	Acronym
Interstitial pneumonia with autoimmune features	IPAF
Combined pulmonary fibrosis and emphysema	CPFE
Familial interstitial lung disease	
Smoking related interstitial lung disease	

3. Useful References for the Diagnosis of Common MDM Presentations

No.	Reference	Topic	Manuscript Type
1	Prasad, J.D., et al. <i>Respirology</i> , 2017. 22(7): p. 1459-1472	MDM Governance	Position Paper
2	Jo, H.E., et al. <i>Respirology</i> , 2017. 22(7): p. 1436-1458	IPF	Position Paper
3	Raghu G et al. <i>Am J Respir Crit Care Med</i> . Vol 183. pp 788–824, 2011	IPF	Consensus Statement
4	Lynch DA et al. <i>Lancet Respir Med</i> . 2018 Feb;6(2):138-153	IPF	Expert opinion
5	Travers, W et al. <i>Am J Respir Crit Care Med</i> . Vol 188, Iss. 6, pp 733–748, Sep 15, 2013	IIP	Consensus Statement
6	Vasakova M et al. <i>Am J Respir Crit Care Med</i> . Vol 196, Iss 6, pp 680–689, Sep 15, 2017	HP	Expert Opinion
7	Salisbury ML et al. <i>Am J Respir Crit Care Med</i> . 2017 Sep 15;196(6):690-699	HP	Expert Opinion
8	Fischer A et al. <i>Eur Respir J</i> 2015; 46: 976–987	IPAF	Consensus Statement
9	Ryerson CJ et al. <i>Am J Respir Crit Care Med</i> . 2017 Nov 15;196(10):1249-1254	Unclassifiable ILD and Diagnostic Confidence Criteria	Consensus Statement
10	Skolnik K and Ryerson CJ. <i>Respirology</i> . 2016 Jan;21(1):51-6	Unclassifiable ILD	Expert Opinion
11	Baughman R et al. <i>Am J Respir Crit Care Med</i> . Vol 183. pp 573–581, 2011	Sarcoidosis	Expert Opinion

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12	Raouf S et al. Chest 2016; 150(4):945-965	Cystic Lung Disease	Expert Opinion
13	Van den Hoogen F et al. Arthritis Rheum. 2013; 65: 2737-47	Scleroderma	Consensus statement
14	Aletaha D, Arthritis Rheum. 2010; 62: 2569-81	Rheumatoid Arthritis	Consensus statement
15	Lundberg IE et al. Arthritis Rheum. 2017; 69: 2271–2282	Myositis	Consensus statement
16	Bloch D, Arthritis Rheum. 1990; 33: 1068-73	Pulmonary Vasculitis	Consensus statement
17	Henderson DW et al. Int J Occup Environ Health. 2004 Jan-Mar;10(1):40-6	Asbestosis	Expert Opinion

4. Other Resources

- Pulmonary Fibrosis Australasian Clinical Trials Network (PACT) <http://www.cre-pf.org.au/pact>
 - Provides a list of current clinical trials in Australasia
- Australian IPF Registry: <https://lungfoundation.com.au/health-professionals/idiopathic-pulmonary-fibrosis-registry/>
 - Provides information for clinicians and participants in the Australian IPF registry
- Drug Induced Lung Diseases - Pneumotox: <http://www.pneumotox.com/>
 - Provides information about known drug induced pulmonary toxicities