

# Hypersensitivity Pneumonitis: A Comprehensive Review

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## CME Items

1. The pathogenesis of hypersensitivity pneumonitis (HP) involves:
  - a. Immune complexes
  - b. T<sub>H</sub>1 cell alveolitis
  - c. T<sub>H</sub>17 cell polarization in fibrotic disease
  - d. All of the above
2. Which of the following is a typical yet not pathognomonic finding on chest auscultation in patients with HP?
  - a. Expiratory wheezing
  - b. End-inspiratory Velcro-crackles
  - c. End-inspiratory squawks
  - d. None of the above
3. Which of the following is not a radiological feature of HP?
  - a. Cavitating nodules
  - b. Upper/middle zone predominance
  - c. Centrilobular nodules
  - d. Mosaic attenuation
4. Which of the following combination of features is commonly referred to as the “histologic triad” of HP?
  - a. Cellular nonspecific interstitial pneumonia, cellular bronchiolitis, granulomatous inflammation
  - b. Usual interstitial pneumonia, granulomatous inflammation, bridging fibrosis
  - c. Bronchiectasis, granulomatous inflammation, organizing pneumonia
  - d. None of the above
5. The cornerstone of treatment of HP is
  - a. Corticosteroid treatment until resolution
  - b. Corticosteroids plus immunosuppressive agents until resolution
  - c. Avoidance of further antigen exposure
  - d. Antifibrotic drugs (pirfenidone, nintedanib)
6. What level of bronchoalveolar lavage (BAL) lymphocytosis reliably excludes a diagnosis of idiopathic pulmonary fibrosis?
  - a.  $\geq 30\%$
  - b.  $\geq 25\%$
  - c.  $\geq 20\%$
  - d.  $\geq 15\%$
7. What is the significance of positive serum precipitating antibodies (precipitins)?
  - a. Diagnostic of HP
  - b. Marker of exposure
  - c. Marker of exposure and diagnostic
  - d. None of the above
8. On high-resolution computed tomography, what is the most challenging differential diagnosis of fibrotic HP?
  - a. Fibrotic sarcoidosis
  - b. Fibrotic organizing pneumonia
  - c. Asbestosis
  - d. Idiopathic pulmonary fibrosis
9. What percentage of BAL lymphocytes is usually seen in patients with subacute HP?
  - a.  $>50\%$
  - b.  $>40\%$
  - c.  $>35\%$
  - d.  $>30\%$
10. What is the strongest predictor of the diagnosis of HP?
  - a. Symptoms 4-8 hours after exposure
  - b. Recurrent episodes of symptoms
  - c. Positive precipitins
  - d. Exposure to a known offending antigen