Typical Pattern Calcification in an Occupational Lung Disease

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Fig-1: *Showing bilateral diffuse non homogenous opacity*

Fig- 2: *Showing eggshell clacification of lymph nodes*

A 32 years old male non-smoker presented with non-productive cough and dyspnoea for 9 months duration. On physical examination, the patient had bilateral wheezing and end inspiratory fine crackles. On enquiry regarding his past occupation, he stated that he has worked in a stone crashing factory for 10 years. His chest X-Ray (PA) view (Fig.-1) showed bilateral diffuse non-homogenous opacity along with multiple calcified rounded opacity scattered in hilar and paratracheal region ("Egg shell" calcification of lymph nodes) (Fig-2).

Spirometry showed both restrictive and obstructive pattern. Sputum for Mycobacterium tuberculosis smear was negative. Finally it was diagnosed as silicosis. With long-term, less intense exposure, small rounded opacities in the upper lobes may appear on the chest radiograph after 15–20 years of exposure (simple silicosis). Calcification of hilar nodes may occur in as many as 20% of cases and produces a characteristic "eggshell" pattern.[1]

Conflict of Interest: None

References:

1. Harrison's Internal Medicine > Chapter 250. Environmental Lung Disease .17th Edition.

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