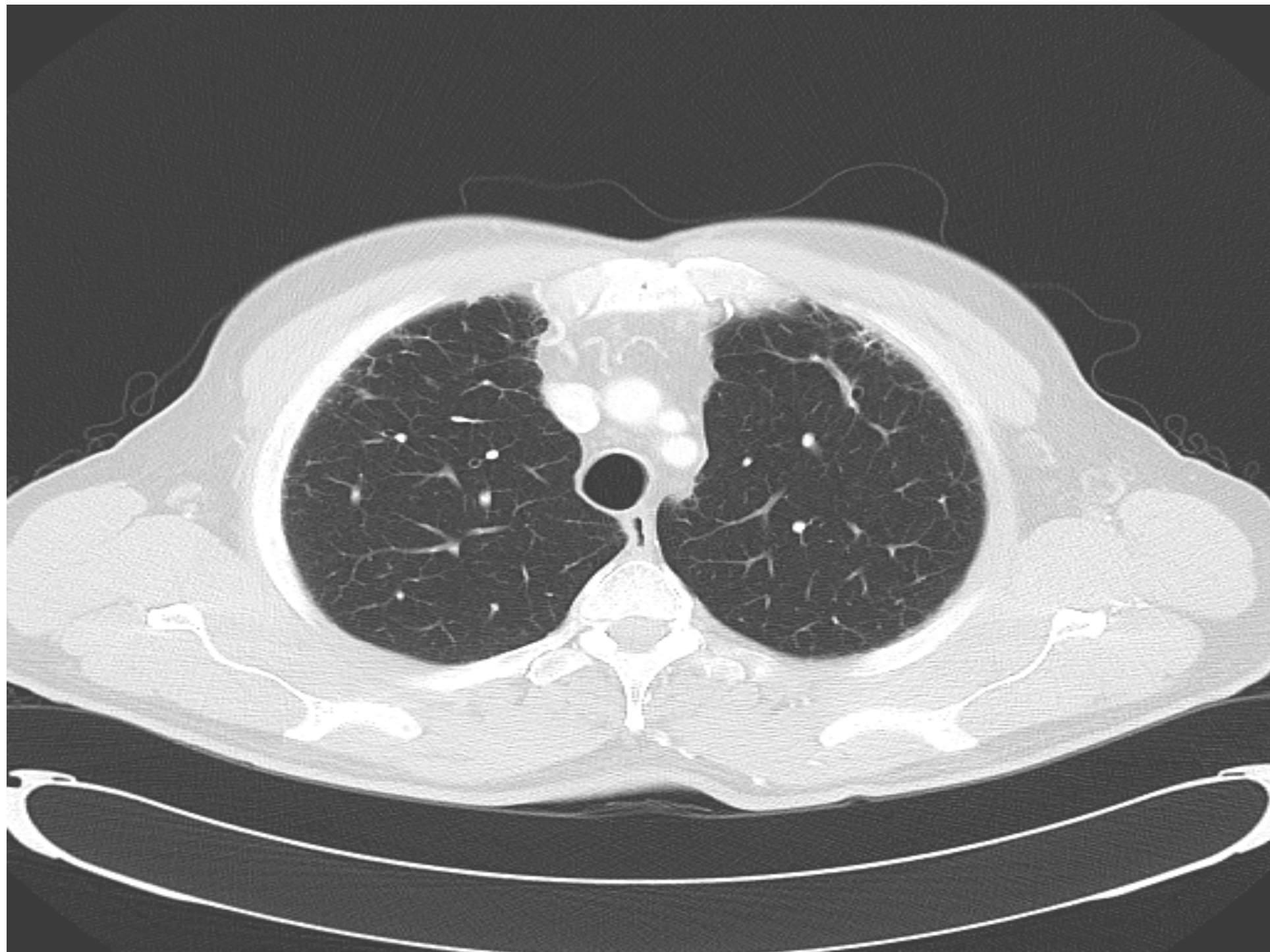


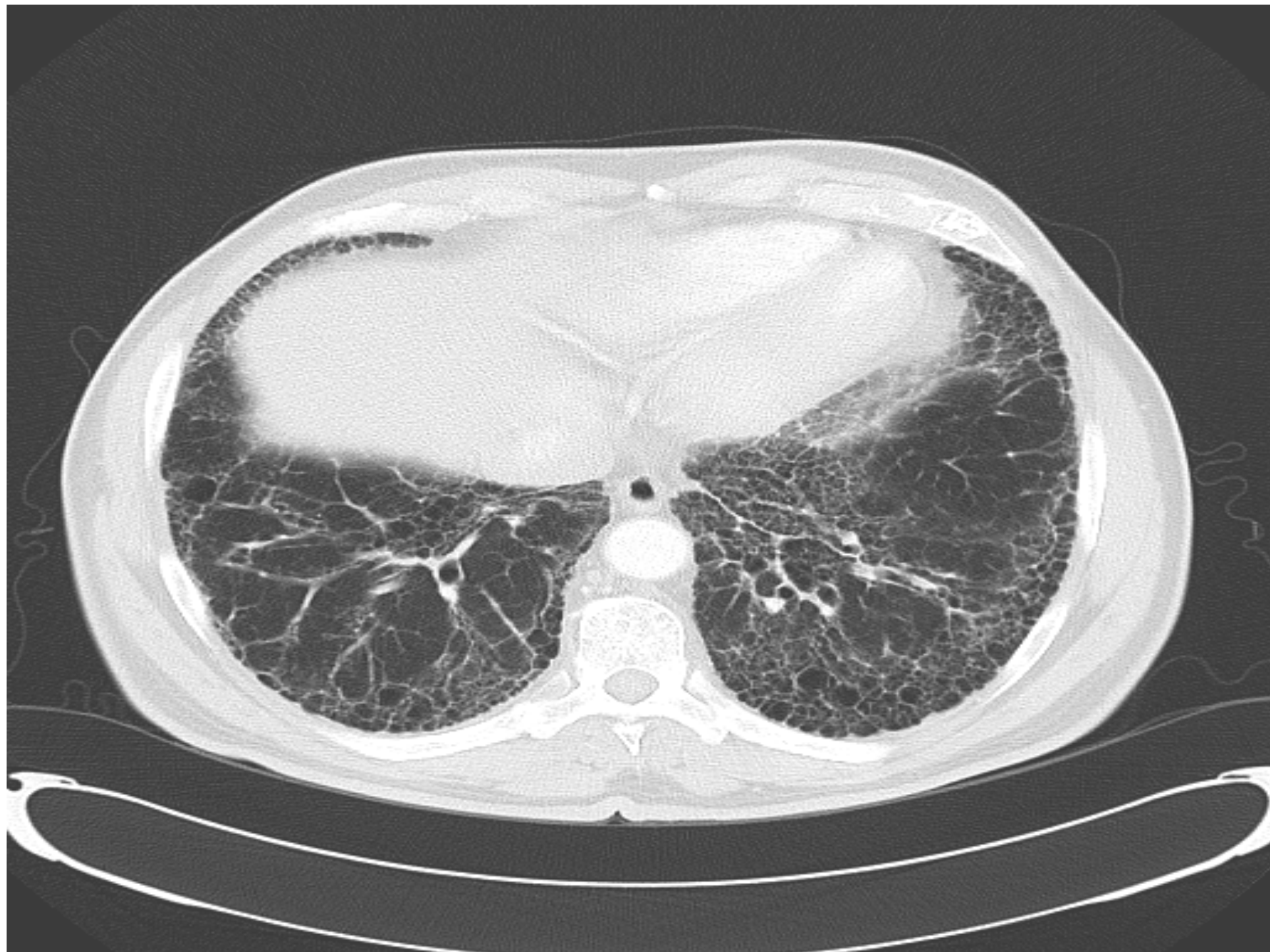
# UNE FIBROSE PULMONAIRE LENTEMENT EVOLUTIVE

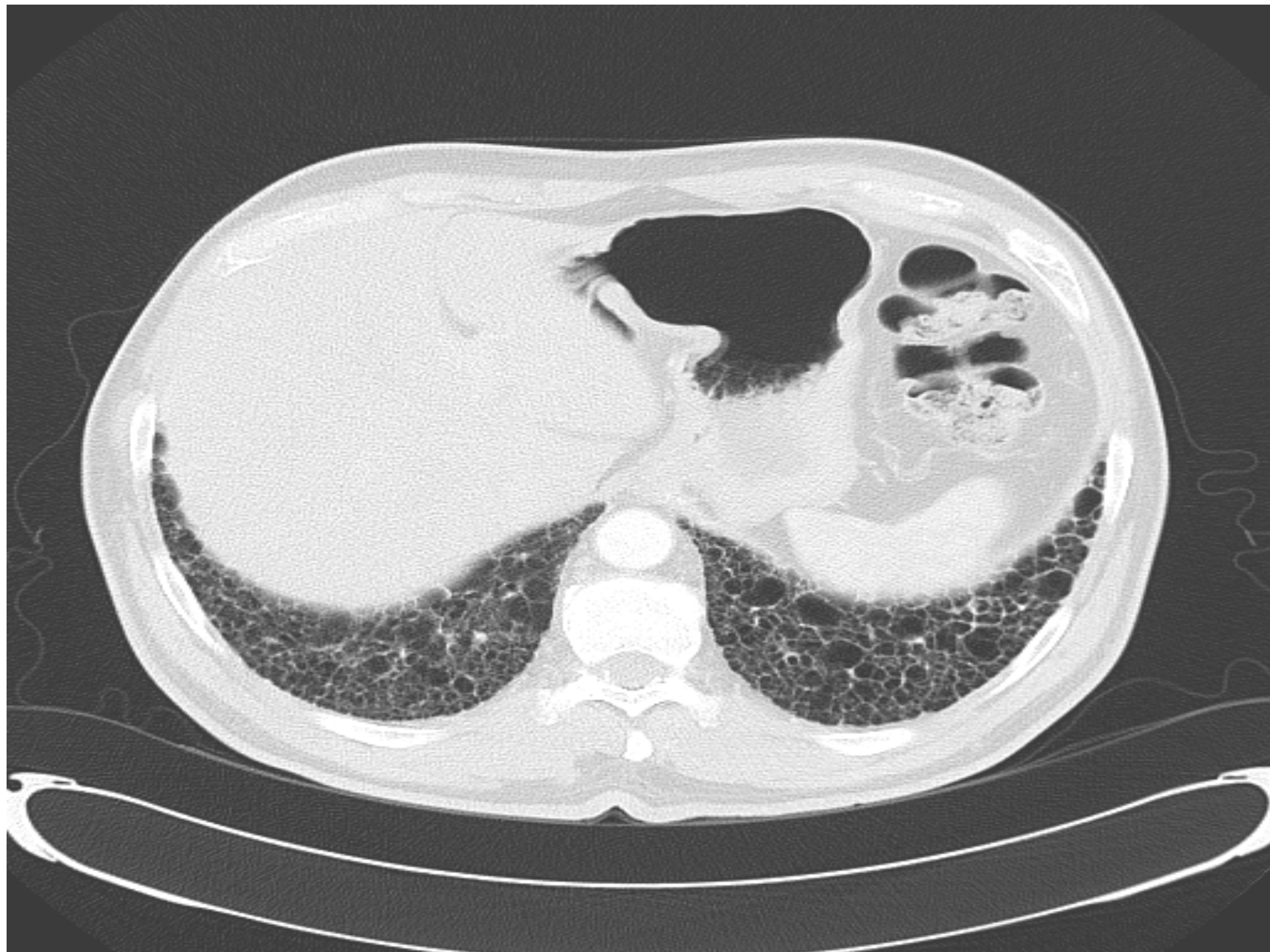
DR NEWINGER GEORGES  
CH MULHOUSE

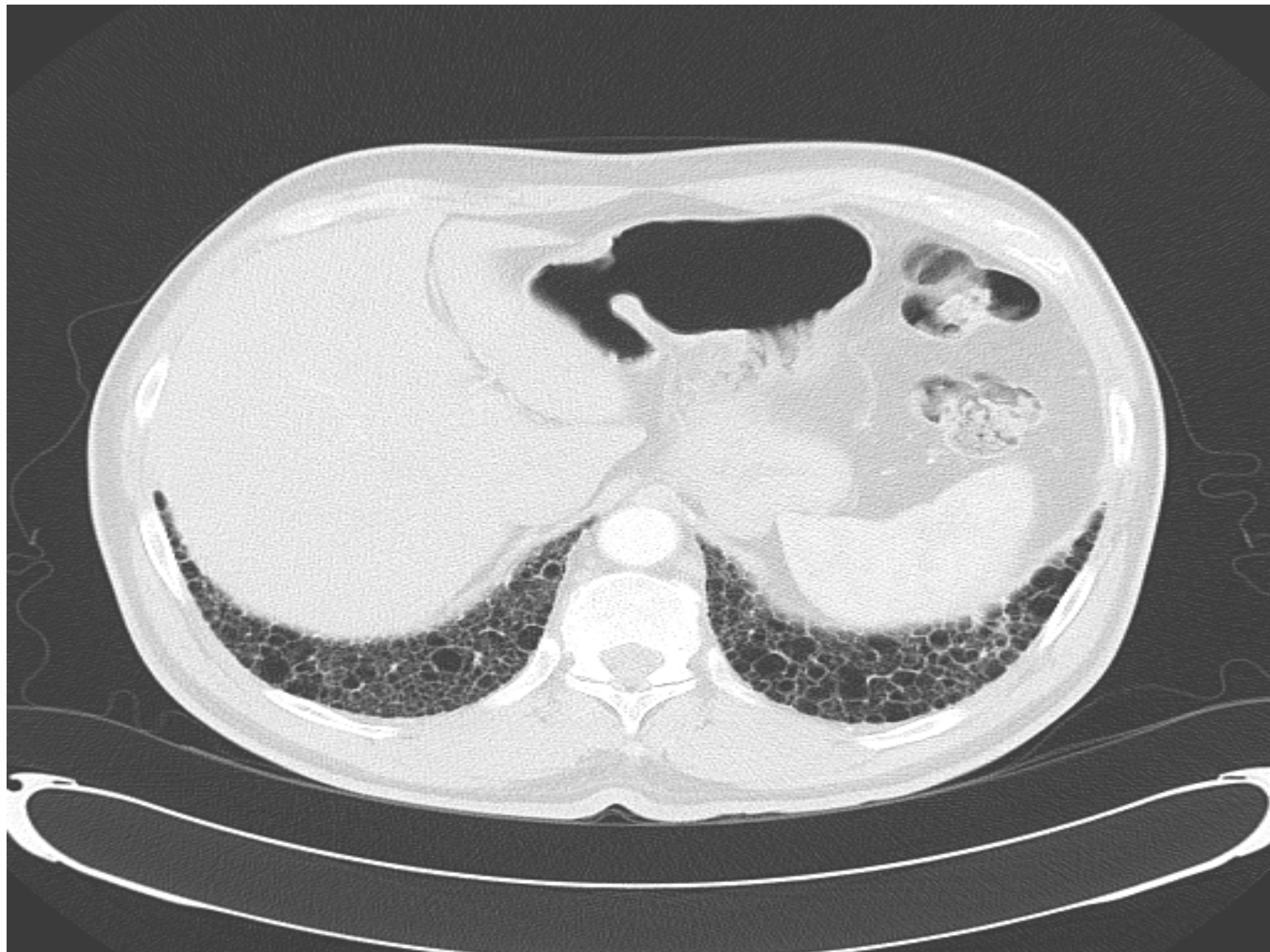
# M. G. DANIEL né en 1949

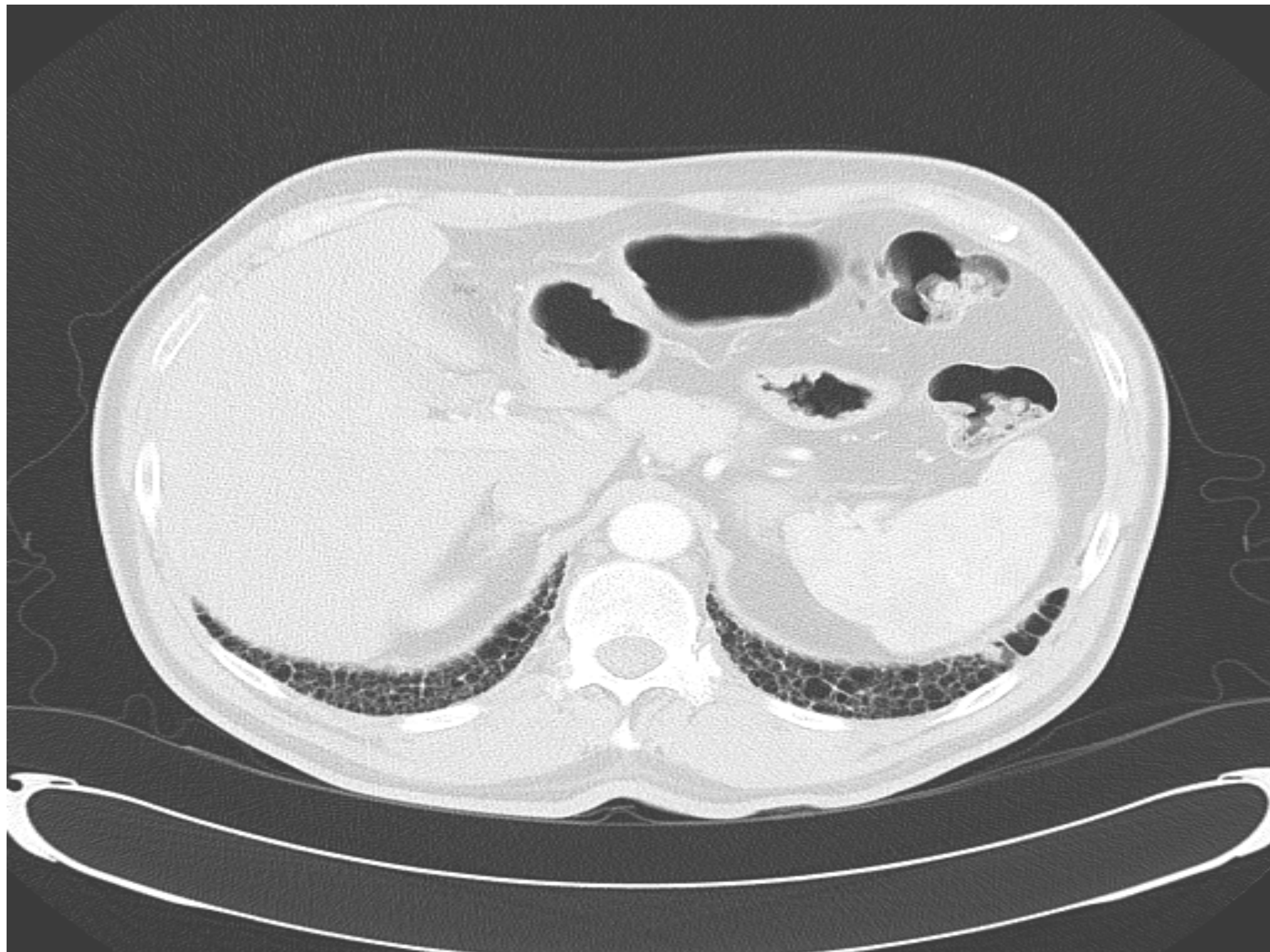
- ▣ 2000: Affûtage 12 ans, laborantin, pas d'amiante. Tabac (20 PA) sevré depuis 20 ans
- ▣ Toux matinale, pas de dyspnée, fins crépitants
- ▣ Fludex pour HTA, Amarel
- ▣ Echo cœur: légère dilatation biauriculaire, tr. relaxation diastolique, FE à 0,6 P° AP normale
- ▣ Thorax: discret syndrome interstitiel bibasal
- ▣ Scanner: rayon de miel bibasal, DDB de traction
- ▣ LBA: 260/mm<sup>3</sup>, 69% Mph, 6% Lc, 19% Neutro  
5% Eos, 1% Mastoc

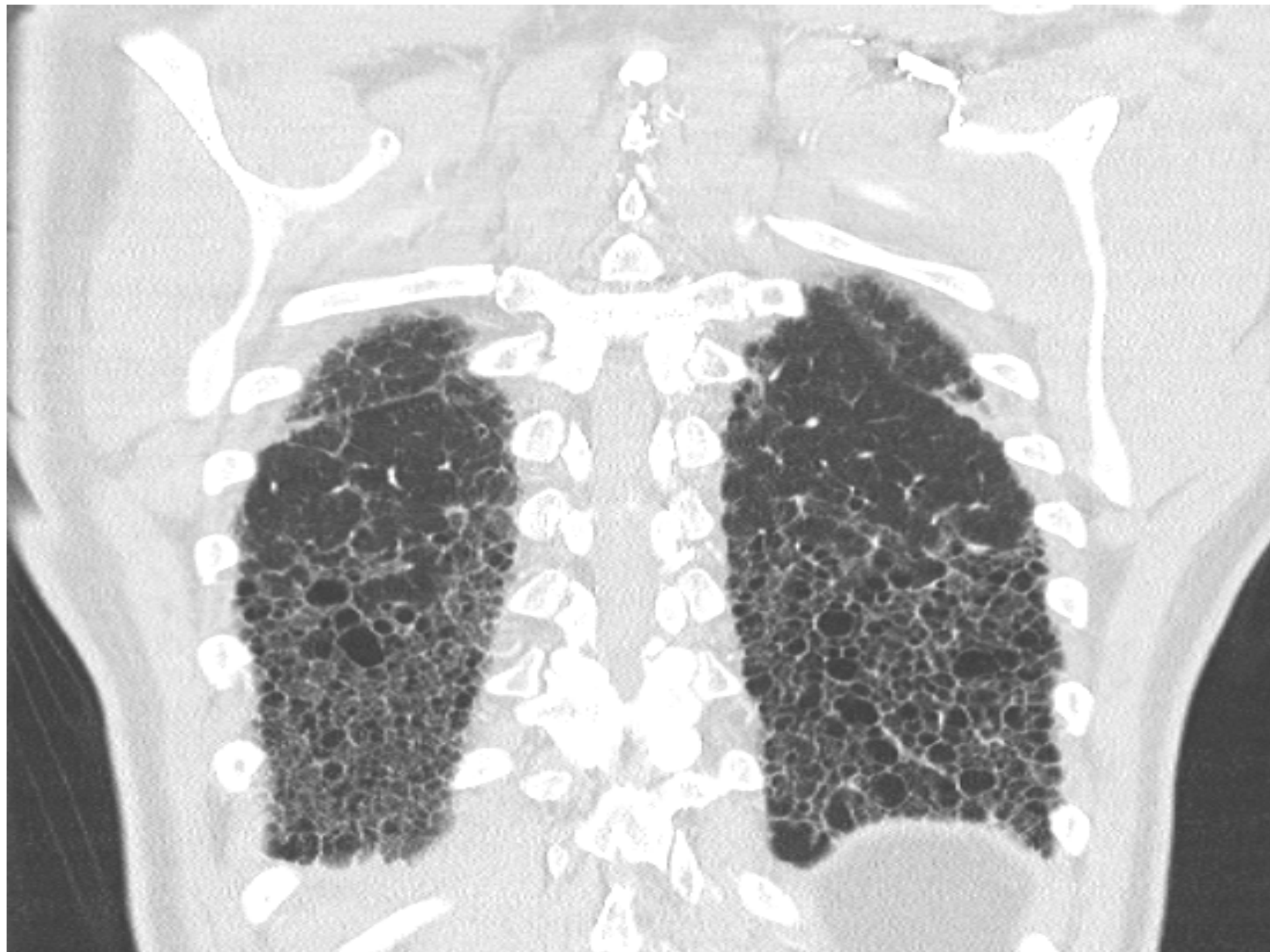








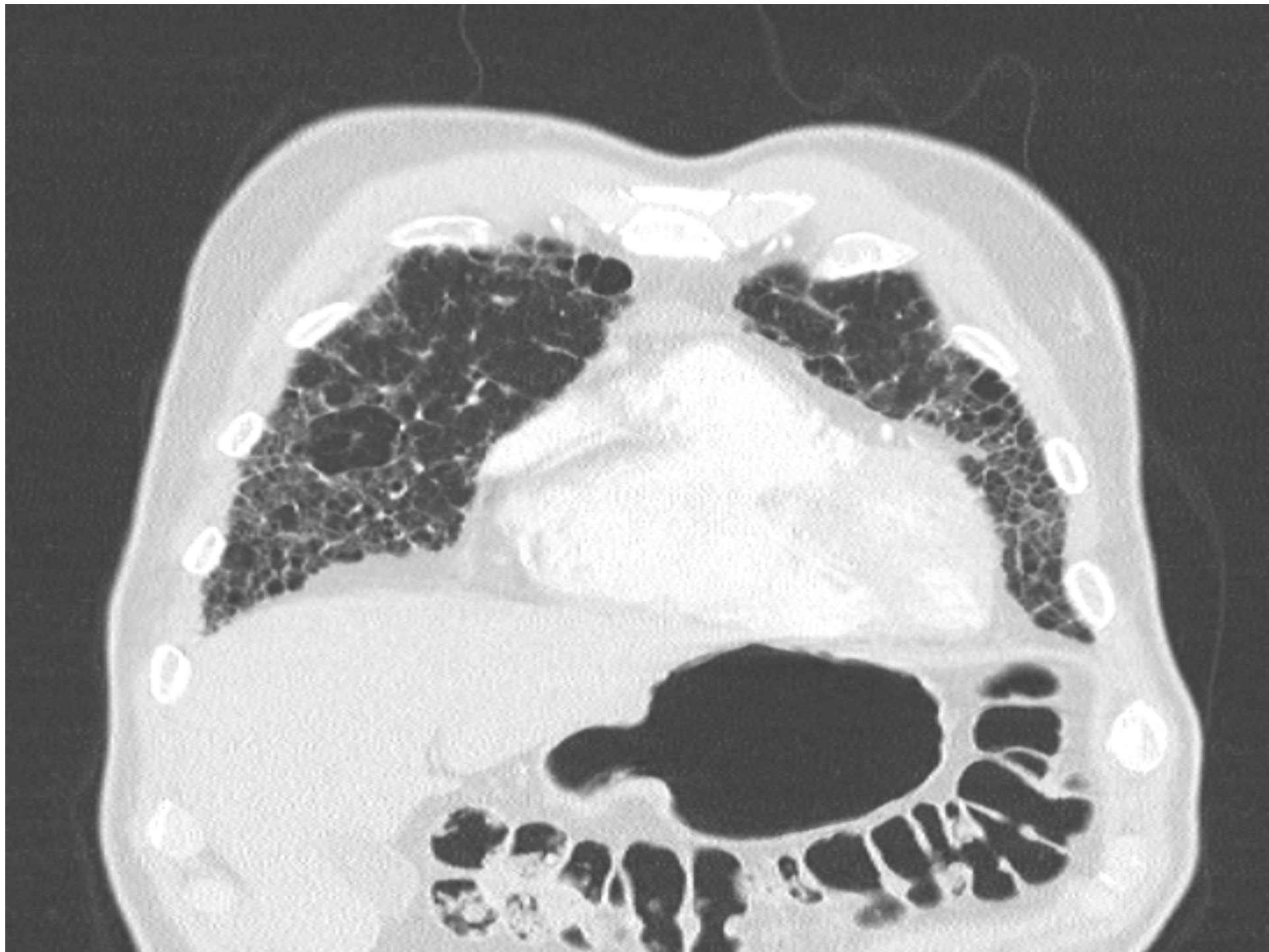












# EFR 2000 2002 2006 2011

▣ CV	3660(85)	4130	3660(92)	3670(91)
▣ VEMS	2830(84)	3580	3020(95)	2830(93)
▣ VR	1820(87)			1290(55)
▣ CPT	5490(84)			4960(76)
▣ CO	84%	91%	64%	64%
▣ DLCO/VA 120 %		110%	79%	81%
▣ PaO <sub>2</sub>	85			96
▣ PaCO <sub>2</sub>	45			40

# VO2      2000                      2006                      2011

▣ VO2/Kg/mn	33,6	30,1	31,3
▣ W	240	210	180
▣ VE	81 (30%)	77(27%)	77(28%)
▣ PH	7,34	7,30	7,33
▣ SA02	87%	90%	89%
▣ PaO2	65 → 54	71 → 55	72 → 54
▣ PaCO2	39 → 49	38 → 41	33 → 44
▣ P(A-a)O2	47	57	55

# M.G. DANIEL

- ▣ EVOLUTION: lente, sans exacerbation
    - Extension des images en rayons de miel
    - du transfert du CO, désaturation à l'effort
  - ▣ DIAGNOSTIC : Opacités réticulées et images en rayons de miel prédominant en bibasal
- FIBROSE PULMONAIRE IDIOPATHIQUE ?
- PINS ?
- FIBROSE PULMONAIRE DES METAUX DURS ?