

Sarcoidosis: Looking for Answers

Sarcoidosis is a disease shrouded in mystery. Experts once thought sarcoidosis was extremely rare. Though it's now known to affect tens of thousands of people, sarcoidosis doesn't always present symptoms, so it's difficult to know just how many people have it. The cause of sarcoidosis remains unidentified, and there's no known way to prevent the disease.

Actor/comedian Bernie Mac recently brought attention to sarcoidosis when he said that he was diagnosed with the disease in 1983. Mac maintained that sarcoidosis hasn't limited him or slowed him down, and he announced the upcoming creation of the Bernie Mac Foundation, which will help raise money for sarcoidosis organizations.

Though there's much research to be done, here's what we do know about this condition.

The basics

Sarcoidosis causes inflammation of tissues in the body, and it's characterized by granulomas, which are clumps of inflamed immune cells. It can attack any organ, but approximately 90 percent of sarcoidosis cases involve pulmonary organs.

Pulmonary sarcoidosis causes loss of lung volume and increased lung stiffness. Sometimes symptoms don't appear, and other times patients experience shortness of breath, dry cough, and wheezing.

Sarcoidosis affects mainly adults between ages 20 and 40, and blacks have a three-times greater risk for sarcoidosis as Caucasians.

Diagnostic measures

Diagnosis typically involves a medical history, physical, and any number of diagnostic tests. A chest X-ray, which shows granulomas or lymph nodes, is almost always used to confirm a diagnosis of sarcoidosis. Ninety-five

percent of those with sarcoidosis have an abnormal chest X-ray.

Pulmonary function tests are used to measure how your lungs are affected by the disease. A spirometer, for example, measures the amount of air that goes in and out of your lungs; low amounts can indicate sarcoidosis.

Another measurement for sarcoidosis is the amount of oxygen in the blood. Pulse oximetry is a noninvasive method for showing the amount of oxygen the heart and lungs are moving into your blood. An arterial blood gas test reveals the same information as pulse oximetry, only an ABG is invasive but more accurate.

Sometimes a bronchoscopy is performed so doctors can take a look at your airways. A lavage also may be done at the same time to bring up cells from the airways that may indicate the presence of granulomas.

Pharmacotherapy

Sarcoidosis often disappears without treatment, but 20

percent to 30 percent of those who have pulmonary sarcoidosis suffer permanent lung damage. Oral corticosteroids are the primary treatment for the disease, and low doses typically relieve symptoms of inflammation.

Follow-up care is an important aspect of treatment for sarcoidosis because new symptoms can arise at any time, and the condition may slowly worsen without your detection.

The frequency of your follow-up exams depends on the severity of your symptoms, which organs are affected, what treatment you're using, and any complications that occur.

Editor's note: Information adapted from the National Heart, Lung, and Blood Institute and the American Lung Association. ■

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notes

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