67 y/o female with SOB

Edward Gillis, DO
Two and a half months after treatment
Cryptogenic Organizing Pneumonia
• Multifocal heterogenous opacities

• Most pronounced in the RLL

• Opacities resolved after 1 month of corticosteroids
Two and a half months after treatment

Recurrence of COP with a different distribution of the opacities
- Migratory opacities
Cryptogenic Organizing Pneumonia

Imaging Features

• Unilateral or bilateral patchy consolidations that resemble multifocal pneumonia
• These consolidations do not represent an active infection
  – They are the result of intraalveolar fibroblast proliferations, thought to be a repair response to a prior infection
• Can see nodular opacities
• Preserved lung volumes
• Mild interstitial edema as a result of chronic inflammation
Cryptogenic Organizing Pneumonia

Imaging Features

- Peripheral or peribronchial distribution
- Lower lobes most often involved
- Migratory opacities on serial chest radiography
Cryptogenic Organizing Pneumonia

• Formerly called bronchiolitis obliterans organizing pneumonia (BOOP).
• BOOP terminology has since been replaced with COP, in an effort to avoid confusion with airway diseases
• Classified as an Idiopathic Interstitial Pneumonia
Cryptogenic Organizing Pneumonia

Clinical Features

• Mean age: 55 years
• M = F
• Mild dyspnea, cough, and fever for a few weeks
• Patients typically report a respiratory tract infection prior to the onset of their symptoms, and usually received antibiotics
• Majority have an excellent response to corticosteroids
• Relapses are frequent, most commonly within 3 months after corticosteroid therapy is reduced or stopped
Cryptogenic Organizing Pneumonia

Histologic Features

- Presence of organizing granulation tissue within the alveolar ducts and alveoli +/- bronchioles.
- Intraluminal plugs of granulation tissue may extend from one alveolus to an adjacent one through the pores of Kohn, which may be seen as the characteristic “butterfly” pattern on imaging.
- Patchy lung involvement with preservation of the lung architecture
- Few inflammatory cells
References