

TREATMENT:

There is no specific cure for sarcoidosis. Generally it must run its course and this may take several months. Remember, most cases of sarcoidosis heal spontaneously and require no specific treatment at all. If indicated, treatment is determined based on progression of disease and risks to affected organs. Treatment is designed to slow down or even halt the development of granulomas.

Common drugs used to treat are:

- Corticosteroids - powerful anti inflammatory which help to suppress the inflammation of sarcoidosis and melt away the inflammatory nodules.
- Cytotoxic agents – used to suppress the immune system.
- Immunomodulators – a treatment that stimulates or slows down reactions of the immune system.
- Certain antibiotics.

Treatment of sarcoidosis may need to be prolonged, and flare-ups may occasionally occur when the treatment stops. Medication is usually indicated whenever the lung involvement is sufficient to produce significant breathlessness or distressing cough. Medication is also required whenever vision is threatened or when the heart or kidneys are involved.

Cortisone medications are the initial treatment of choice because of their powerful anti-inflammatory abilities. In more severe or persistent cases, your health professional may add other medications. Due to side effects of these medications, risks and benefits must be carefully weighed. Usually it is possible to select doses of cortisone which are associated with very minimal side effects. These reactions are not permanent and will subside once the cortisone can be safely withdrawn.

PREVENTING SARCOIDOSIS:

Since it is not known what causes sarcoidosis, there is no known way to prevent its occurrence. As research continues, prevention or cure may possible some day

IF YOU HAVE SARCOIDOSIS:

- Minimized direct exposure to the sun as this may cause an accumulation of calcium in the blood and lead to kidney damage.
- Keep all your health professional's appointments and take your medications as prescribed
- Don't smoke – this can cause further damage to the respiratory system.
- Avoid chemical dust and other lung irritants.
- Remain active, but not to the point of exhaustion.

B R E A T H E
the lung association

65 Brunswick St., Fredericton, NB
1-800-565-LUNG (5864) | info@nb.lung.ca

B R E A T H E
the lung association

SARCOIDOSIS

What you need to know



w w w . n b . l u n g . c a

WHAT IS SARCOIDOSIS?

Sarcoidosis is a chronic inflammatory disease that may affect almost any part of the body. This relatively rare disease affects approximately 35 people out of 100,000 worldwide. There are 14 types of sarcoidosis.

Sarcoidosis appears to be caused by a reaction of the body seeking to defend itself from an invasive agent which, to date, remains unknown. Persistent inflammation (swelling) of the tissues results in lumps called “granulomas” growing in different parts of the body. The most common tissues affected by sarcoidosis are lungs, lymph nodes, eyes, skin, liver, spleen, and kidneys.

In most cases granulomas are found in the lungs suggesting that this may be the route of entry of the causative agent. This same agent travels through the bloodstream to affect other parts of the body.

WHAT CAUSES SARCOIDOSIS?

Despite numerous studies, the cause of sarcoidosis is still unknown. Most evidence suggests that sarcoidosis represents an inflammatory reaction of the body to some as yet unidentified environmental agent, virus, bacteria, or fungi in people with a genetic predisposition.

It is believed that the inhalation of some environmental agent stimulates the immune system to produce an inflammatory response as an attempt to rid the body of this inhaled triggering factor.

Although sarcoidosis is characterized by the presence of nodular swellings in the involved tissues, there is no evidence to suggest that

it is a malignant disease. Nevertheless, the inflammatory nodules of sarcoidosis can interfere with normal functioning of the involved tissues and organs.

Sarcoidosis is not contagious- you can't catch it from someone else.

WHO IS AT RISK?

Anyone can get sarcoidosis, but it is more common in women than men, and more common in young adults between the ages of 20 and 40. In North America, African-Americans are more likely to get sarcoidosis than Caucasians, but this is not the case on other continents.

WHAT ARE THE SYMPTOMS?

Because sarcoidosis can affect virtually any organ or tissue of the body, it can cause different symptoms in different people. Symptoms vary depending on the severity and the region affected.

Signs and symptoms when sarcoidosis affects the lungs:

- Sometimes there are no symptoms at all, and the disease is discovered incidentally from a chest x-ray taken for another reason.
- Shortness of breath, dry persistent cough, chest pain

Other symptoms of sarcoidosis:

- Sores on the skin
- Enlarged lymph glands
- Visual disturbances, bloodshot eyes
- Fatigue, feeling unwell
- Loss of appetite or weight
- Fever or night sweats

HOW IS IT DIAGNOSED?

Sarcoidosis may be recognized by your health professional from the characteristic appearance seen on chest x-ray. When the x-ray appearance is atypical, biopsy of the lungs by bronchoscopy may be required to confirm the diagnosis. Biopsies of lymph glands, the liver, salivary glands or the skin may be necessary in other situations.

To assess the spread of disease your health professional may also order cardiac, eye, kidney, and neurological tests.

HOW DOES IT PROGRESS?

Sarcoidosis can be a mild or a severe disease. In some cases it may even resolve spontaneously after several months. Indeed, by far the majority of people will get well without any treatment. Even with fairly extensive sarcoidosis, people can usually continue to work. However, if sarcoidosis enters a chronic stage, pulmonary fibrosis, and/or heart failure may result and can be disabling.

Although sarcoidosis usually either heals itself or responds to therapy, a few people are still destined to become permanently disabled because of lung or heart failure or both. Other consequences may be blindness from glaucoma, disfigurement of the skin and kidney failure.