中文題目：反覆性胸悶：修格蘭氏症相關之淋巴性間質肺炎

英文題目：Refractory chest tightness: Sjogren’s syndrome associated with lymphocytic interstitial pneumonitis

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Abstract：

Sjögren's syndrome (SS) is a chronic autoimmune inflammatory disorder characterized by diminished lacrimal and salivary gland function, although the clinical manifestations of SS include both exocrine gland involvement and extraglandular disease features.

Here, we report a case of Sjögren's syndrome associated with lymphocytic interstitial pneumonitis. A 52-year-old female was admitted to our hospital because of a “refractory chest tightness” with clinical symptom of dyspnea. Imaging examinations of chest CNYCT showed ground-glass opacities in RML, RLL and LLL. The patient underwent bronchoscope for bronchoalveolar lavage(BAL). The BAL data revealed lymphocyte predominant (61%). Blood test revealed elevated of rheumatoid factor (38.7 IU/mL), Anti-RO (71 U/mL). We consult with OPH doctor arranged basal Schirmer's test which revealed OD:1mm/5 min; OS: 3mm/5min.According above condition, Sjögren's syndrome associated with lymphocytic interstitial pneumonitis was diagnosed.

Interstitial lung disease in SS has several forms, including non-specific interstitial pneumonitis (NSIP), usual interstitial pneumonitis (UIP), lymphocytic interstitial pneumonitis (LIP), and cryptogenic organizing pneumonia (COP). Dyspnea and cough are the usual presenting symptoms. LIP has a strong association with primary SS. It is characterized by a lymphoplasmacytic infiltrates within the interstitium, often forming nodular lymphoid aggregates with or without germinal centers, and lymphocytes within alveolar spaces.