Sarcoidosis, Schaumann's Disease, Sarcoid of Boeck

Sarcoidosis appears briefly and heals naturally in 60 to 70 percent of cases, often without the patient knowing or doing anything about it. 20 to 30 percent of patients with sarcoidosis are left with some permanent lung damage. In 10 to 15 percent of the patients, sarcoidosis can become *chronic* (long lasting). When either the granulomas or fibrosis seriously affect the function of a vital organ (lungs, heart, nervous system, liver, or kidneys), **sarcoidosis can be fatal**. This occurs 5 to 10 percent of the time. No one can predict how sarcoidosis will progress in an individual patient. The symptoms the patient experiences, the caregiver's findings, and the patient's race can give some clues.

Sarcoidosis was once considered a rare disease. We now know that it is a common chronic illness that appears all over the world. It is the most common of the *fibrotic* (scarring) lung disorders. Anyone can get sarcoidosis. It occurs in all races and in both sexes. The risk is greater if you are a young black adult, especially a black woman, or are of Scandinavian, German, Irish, or Puerto Rican origin.

In sarcoidosis, small lumps (also called nodules or granulomas) develop in multiple organs of the body. These granulomas are small collections of inflamed cells. They commonly appear in the lungs. This is the most common organ affected. They also occur in the *lymph nodes* (your glands), skin, liver, and eyes. The granulomas vary in the amount of disease they produce from very little with no problems *(symptoms)* to causing severe illness. The cause of sarcoidosis is not known. It may be due to an abnormal immune reaction in the body. Most people will recover. A few people will develop long lasting conditions that may get worse. Women are affected more often than men. The majority of those affected are under forty years of age. Because we do not know the cause, we do not have ways to prevent it.

SYMPTOMS

- Fever
- Loss of appetite
- Night sweats
- Joint pain
- Aching muscles

Symptoms vary because the disease affects different parts of the body in different people. Most people who see their caregiver with sarcoidosis have lung problems. The first signs are usually a dry cough and shortness of breath. There may also be wheezing, chest pain, or a cough that brings up bloody mucus. In severe cases, lung function may become so poor that the person cannot perform even the simple routine tasks of daily life.

Other symptoms of sarcoidosis are less common than lung symptoms. They can include:

- **Skin symptoms.** Sarcoidosis can appear as a collection of tender, red bumps called erythema nodosum. These bumps usually occur on the face, shins, and arms. They can also occur as a scaly, purplish discoloration on the nose, cheeks, and ears. This is called lupus pernio. Less often, sarcoidosis causes cysts, pimples, or disfiguring over growths of skin. In many cases, the disfiguring over growths develop in areas of scars or tattoos.
- **Eye symptoms.** These include redness, eye pain, and sensitivity to light.
- **Heart symptoms.** These include irregular heartbeat and heart failure.
- **Other symptoms.** A person may have paralyzed facial muscles, seizures, psychiatric symptoms, swollen salivary glands, or bone pain.

DIAGNOSIS

Even when there are no symptoms, your caregiver can sometimes pick up signs of sarcoidosis during a routine examination, usually through a chest x-ray or when checking other complaints. The patient's age and race or ethnic group can raise an additional red flag that a sign or symptom could be related to sarcoidosis.

- Enlargement of the salivary or tear glands and cysts in bone tissue may also be caused by sarcoidosis.
- You may have had a biopsy done that shows signs of sarcoidosis. A biopsy is a small tissue sample that is removed for laboratory testing. This tissue sample can be taken from your lung, skin, lip, or another inflamed or abnormal area of the body.
- You may have had an abnormal chest x-ray. Although you appear healthy, a chest x-ray ordered for other reasons may turn up abnormalities that suggest sarcoidosis.
- Other tests may be needed. These tests may be done to rule out other illnesses or to determine the amount of organ damage caused by sarcoidosis. Some of the most common tests are:
  - Blood levels of calcium or angiotensin-converting enzyme may be high in people with sarcoidosis.
  - Blood tests to evaluate how well your liver is functioning.
  - Lung function tests to measure how well you are breathing.
  - A complete eye examination.

TREATMENT

If sarcoidosis does not cause any problems, treatment may not be necessary. Your caregiver may decide to simply monitor your condition. As part of this monitoring process, you may have frequent office visits, follow-up chest X-rays, and tests of your lung function.

If you have signs of moderate or severe lung disease, your doctor may recommend:

- A corticosteroid drug, such as prednisone (sold under several brand names).
- Corticosteroids also are used to treat sarcoidosis of the eyes, joints, skin, nerves, or heart.
- Corticosteroid eye drops may be used for the eyes.
- Over-the-counter medications like nonsteroidal anti-inflammatory drugs (NSAID's) often are used to treat joint pain first before corticosteroids, which tend to have more side effects.
- If corticosteroids are not effective or cause serious side effects, other drugs that alter or suppress the immune system may be used.
- In rare cases, when sarcoidosis causes life-threatening lung disease, a lung transplant may be necessary. However, there is some risk that the new lungs also will be attacked by sarcoidosis.

PROGNOSIS

Only a small percentage of people have chronic or progressive forms of the illness. In general, the illness tends to be more severe in certain ethnic backgrounds. About 80 percent of people with sarcoidosis have no significant disease activity. For these people, the prognosis is excellent. Only a small percentage of people develop permanent or progressive organ damage. Death related to sarcoidosis is rare.

SEEK IMMEDIATE MEDICAL CARE IF:

- You suffer from shortness of breath or a lingering cough.
- You develop new problems that may be related to the disease. Remember this disease can affect almost all organs of the body and cause many different problems.

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