

February 2013 Arizona Thoracic Society Notes

A dinner meeting was held on Wednesday, 2/27/2013 at Scottsdale Shea beginning at 6:30 PM. There were 27 in attendance representing the pulmonary, critical care, sleep, infectious disease, nursing, pathology and radiology communities.

Dr. George Parides congratulated on Allen Thomas on being named ATS 2013 Clinician of the Year.

Lewis Wesselius announced the ALA 2013 Fight for Air Walk. This will be at the Scottsdale Civic Center on April 27, 2013. To participate or sponsor a walker contact Lonie Padilla at lpadilla@lungarizona.org or 602-429-0007.

Rick Robbins, editor of the Southwest Journal of Pulmonary and Critical Care, announced Tim Kuberski has been named an associate editor.

A discussion was held regarding other states in the Southwest to partner with the Southwest Journal of Pulmonary and Critical Care.

Seven cases were presented:

1. Elijah Poulos, pulmonary fellow from the VA, presented a follow-up to a patient previously presented with optic neuritis, a positive ANCA at 1:40, a positive PR3 antibody at 1:8, and bilateral peribronchial consolidations right greater than left. The patient underwent a core needle biopsy of the lung with a final diagnosis of organizing pneumonia. The patient apparently declined rapidly and is now being given high dose methylprednisolone with the plan to begin cyclophosphamide shortly for a presumptive diagnosis of Wegner's granulomatosis.
2. George Parides, pulmonologist, presented a case of a 17 year old woman when first seen in 2006 in the Emergency Department with chest pain. A CT was done which showed probably bronchial atresia on the left. She also had a positive coccidiomycosis serology. A bronchoscopy was negative. She was treated with fluconazole for about 9 months and then lost to follow up. She next presented in 2009 without change in her CT scan and again had a negative bronchoscopy. Rick Helmers saw her later that year. An open lung biopsy was performed but the results are unknown. She again presented in January of 2013 with increasing consolidation at the bases. Coccidiomycosis was seen on smear and she was begun on amphotericin. She has had minimal improvement. Most felt that continuing her amphotericin was appropriate.
3. Thomas Colby, pulmonary pathologist, presented a 68 year old woman who had a nonsmall cell carcinoma in 2011. She was treated with radiation therapy because her lung function was considered too compromised for pneumonectomy. She presented with increasing bilateral small nodules. A

wedge biopsy showed many +CD1A cells and a diagnosis of histiocytosis X was made.

4. Thomas Colby and Maria L. Cabanas, pulmonary pathologists from the Mayo Clinic, presented a case of a 67 year old that had pulmonary fibrosis on CT scan but was asymptomatic. The fibrosis progressed and biopsy showed adenocarcinoma.
5. Tim Kuberski, infectious diseases from Maricopa, presented a 51 year old man who presented with cough. Chest x-ray revealed two large masses, one in the RUL and one in LUL, against a background of smaller nodules. The patient was a miner and a diagnosis of silicosis was made. He was followed and CT showed cavitation of one of the nodules. Quantiferon was negative as was PCR for *Mycobacterium tuberculosis*; however, his acid-fast smear was positive. He eventually grew *Mycobacterium kansasii* and is now on treatment.
6. Al Thomas, pulmonologist at the VA, presented a 65 year old who had a large osteophyte with surrounding fibrosis.
7. Gerald Swartzberg, pulmonologist, presented a 74 year old who had a squamous cell carcinoma resected who now has a fungus ball in a residual cough and has hemoptysis. Some suggested intracavitary amphotericin as a possibility for treatment.

There being no further business, the meeting was adjourned at about 8 PM. The next meeting is Wednesday, March 20, 2013 at 6:30 PM at Scottsdale Shea.

Richard A. Robbins, MD
CCR Representative
Arizona Thoracic Society