

March 2015 Arizona Thoracic Society Notes

The March 2015 Arizona Thoracic Society meeting was held on Wednesday, March 25, 2014 at the Scottsdale Shea Hospital beginning at 6:30 PM. This was a dinner meeting with case presentations. There were 14 in attendance representing the pulmonary, critical care, sleep, radiology and oncology communities.

Dr. Richard Robbins made a presentation entitled "The History of Exhaled Nitric Oxide Measurement" focusing on the development of exhaled nitric oxide in the early 1990's.

There were 3 case presentations:

1. Sandra Till, a third year pulmonary fellow at the Good Samaritan/VA program, presented an elderly man admitted to the Phoenix VA with an exacerbation of chronic obstructive pulmonary disease (COPD). His CT findings showed with centrilobular emphysema, bronchial edema, and scattered ground glass opacities. It was felt that the CT findings most likely represented a bronchiolitis from his exacerbation of COPD.
2. Richard Robbins presented a 49 year old man with a positive PPD and Gold QuantiFERON who has extensive psoriasis and had biological therapy with etanercept recommended. He had an extensive past medical history of diabetes and sleep apnea secondary to obesity which resolved with gastric bypass. His liver was palpable at his right costal margin and his liver enzymes were mildly elevated. Chest x-ray was normal. Most felt that therapy for latent tuberculosis was indicated with some recommending isoniazid, others recommending rifampin and others recommending both drugs. He was treated for one month with isoniazid and his liver enzymes all declined into the normal range. He has begun etanercept and 6-9 months of isoniazid therapy are planned.
3. Stephanie Fountain, a second year internal medicine resident from the Good Samaritan/VA program presented an elderly man with a history of adenocarcinoma of the pancreas treated with chemotherapy and radiation in Chicago just prior to moving to Phoenix. He presented with abdominal pain secondary to an ileus which spontaneously improved. A CT scan performed during the abdominal evaluation showed multiple small nodules and some scattered ground glass opacities which was reminiscent of idiopathic interstitial pneumonia with cystic changes. Biopsy showed adenocarcinoma which special stains were most consistent with a pancreas primary. Discussion ensued about this unusual presentation CT presentation of metastatic pancreatic cancer.

The next meeting in Phoenix will be at Scottsdale Shea on Wednesday, May 27 at 6:30 PM.

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