

Idiopathic lymphocytic pleuritis - a case report

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Introduction: Lymphocytic pleuritis most often occurs as a part of other diseases and conditions such as tuberculosis, malignancies, systemic connective tissue diseases or post-coronary artery bypass graft surgery. Diagnosis of pleural effusion often requires a multidisciplinary approach and diagnosis of idiopathic pleuritis is made only after the exclusion of all known etiological causes.

A 46 years old male patient, without previous chronic diseases

Symptoms (last 6 months):

- dry cough
- increased fatigue

Diagnostics:

- chest X-ray
- thorax MSCT
- thoracentesis
- bronchoscopy
- percutaneous pleural biopsy
- VATS

Therapy: Prednisone started with 40mg daily with a gradual dose reduction

Result: complete regression after 6 months of therapy

Conclusion: Idiopathic lymphocytic pleuritis is a rare, immunosuppressant-responsive form of this disease and the diagnosis is made by excluding the known causes of this disease.

