



### **Occupational and Environmental Exposures Associated With Increased Risk of Interstitial Lung Abnormalities in Individuals**

Our next abstract we're going to discuss is environmental exposures associated with the increased risk of interstitial lung abnormalities in individuals at risk for familial interstitial pneumonitis or pneumonia. I think this particular abstract is important because again, it's looking at a very novel area where we have very little data. We see reticulations on HRCT's all the time, but we don't know necessarily is that going to progress? Is that going to turn into UIP or fibrosing NSIP or another idiopathic interstitial pneumonia or chronic HP? Trying to understand these ILA's as we call them, it is imperative are we looking at early disease process? Are there any clues of progression and prognosis for individuals and ultimately in the end, we hope to learn how do we manage these patients and when, and how do we treat?

This particular abstract described environmental risk factors associated with the presence of interstitial lung abnormalities on high-resolution chest CT's in asymptomatic individuals. But these individuals had first degree relatives with FIP. Essentially siblings or offspring that had been previously diagnosed. There were 336 first degree relatives that were included and the average age was about 53. With the study, they had histories, exposure histories, high resolution CT's, pulmonary function testing, and blood draws. Interestingly, they found independent risk factors for ILA's included aluminum smelting, lead, birds, and mold exposure. Older age, cigarette smoking, and shorter telomere links were also associated with ILA's. I don't think this data necessarily changes our patterns of management in the clinic just yet, but it does help increase our awareness for certain occupational exposures and environmental exposures that may contribute to interstitial lung abnormalities.