



Pulmonary fibrosis symptoms and risk factors.



Check if you have any of the symptoms or risk factors below and **schedule time to discuss with your doctor.**

Do you have any of these symptoms?

- Shortness of breath
- Dry, hacking cough
- Fatigue

Are you at risk for pulmonary fibrosis?

- Current or past smoker
- Age 60 or older
- Family history of interstitial lung disease
- Use of certain medications

Drugs used to treat cancer (chemotherapy), drugs used to treat abnormal heart rhythms (such as amiodarone), drugs used to treat inflammatory conditions (such as methotrexate), and an antibiotic used to treat urinary tract infections (nitrofurantoin) are some of the better known drugs that can cause injury, inflammation, and scarring in the lungs. Numerous other drugs have been implicated as causes of PF in some cases.

- Radiation treatment to the chest
- Environmental exposures

Typically called hypersensitivity pneumonitis (HP) or chronic hypersensitivity pneumonitis. HP occurs when the lungs react with inflammation and scarring after breathing in mold spores, bacteria, animal proteins (especially from indoor or caged birds), or other known triggers. No one is certain why some people are so susceptible to developing HP and others are not.

- Autoimmune diseases

Also called connective tissue diseases, collagen vascular diseases, or rheumatologic diseases. “Auto” means self and “immune” refers to your immune system. So if you have an autoimmune disease affecting your lungs, it means that your body’s immune system is attacking your lungs. Examples of autoimmune diseases that can cause PF include: Rheumatoid arthritis; Scleroderma (also called systemic sclerosis); Sjögren’s syndrome; and Polymyositis, dermatomyositis, and antisynthetase syndrome.

- Occupational exposures

Also called pneumoconiosis, can develop after significant exposure to a wide variety of inorganic dusts, including asbestos, silica, coal dust, beryllium, and hard metal dusts.

- Unknown (most common)

The most common type of PF is idiopathic PF, which means unknown cause. PFF research is helping identify additional causes.

Discuss with your doctor

Print this form and use it to talk to your doctor about pulmonary fibrosis. Ask your doctor to listen for crackles in your lungs, and about pulmonary function and/or high-resolution computed tomography (HRCT) tests to help facilitate a clear diagnosis. A referral to a pulmonologist—a lung specialist—may be necessary. Be persistent and advocate for your health.