

Classification of Idiopathic Interstitial Pneumonias

AIP	=	Acute interstitial pneumonia
AMP	=	Alveolar macrophage pneumonia
CFA	=	Cryptogenic fibrosing alveolitis
COP	=	Cryptogenic organizing pneumonia
DAD	=	Diffuse alveolar damage
DIP	=	Desquamative interstitial pneumonia
IPF	=	Idiopathic pulmonary fibrosis
LIP	=	Lymphocytic interstitial pneumonia
NSIP	=	Non-specific interstitial pneumonia
OP	=	Organizing pneumonia
PCP	=	<i>Pneumocystis carinii</i> pneumonia
RB-ILD	=	Respiratory bronchiolitis - interstitial lung disease
UIP	=	Usual interstitial pneumonia

Original - Liebow -1968	Current – 2000 (ATS / ERS)
Usual Interstitial Pneumonia - <i>UIP</i>	Usual Interstitial Pneumonia - <i>UIP</i> (Idiopathic Pulmonary Fibrosis - <i>IPF</i>)
Desquamative Interstitial Pneumonia - <i>DIP</i>	Alveolar Macrophage Pneumonia - <i>AMP</i> Overlap with respiratory bronchiolitis associated interstitial lung disease - <i>RBILD</i>
Lymphocytic Interstitial Pneumonia - <i>LIP</i>	Lymphocytic Interstitial Pneumonia - <i>LIP</i> Lymphoproliferative diseases are excluded !!
Giant Cell Interstitial Pneumonia - <i>GIP</i>	(Hard Metal Lung Disease - cobalt sensitivity)
Bronchiolitis obliterans with Interstitial Pneumonia - <i>BIP</i>	Cryptogenic organizing pneumonia - <i>COP</i> syn Idiopathic Bronchiolitis Obliterans Organizing Pneumonia - <i>idiopathic BOOP</i>
No direct correlate	Acute Interstitial Pneumonia - <i>AIP</i>
No direct correlate	Nonspecific Interstitial Pneumonia - <i>NSIP</i> - <i>cellular type</i> - <i>fibrotic type</i>

Clinic	Histo	Usual radiographic features	Distribution on CT	Typical CT findings	differential diagnosis
IPF / CFA	UIP	Basal predominant reticular abnormality, volume loss	Peripheral, subpleural, basal	Honeycombing, traction bronchiectasis / bronchioloelectasis, architectural distortion, focal ground glass	Asbestosis, collagen vascular disease, hypersensitivity, pneumonitis, sarcoidosis
DIP	AMP	Ground glass opacity	Lower zone, periph. predominance	Ground glass attenuation, reticular lines	RB-ILD, hypersensitivity pneumonitis, sarcoidosis, PCP
RB-ILD	RB	Bronchial wall thickening / ground glass opacity	Diffuse	Bronchial wall thickening centrilobular nodules, patchy ground glass opacity	AMP, NSIP, hypersensitivity pneumonitis
AIP	DAD	Progressive diffuse ground glass density / consolidation	Diffuse	Consolidation & ground glass opacity, often with lobular sparing, traction bronchiectasis later	Hydrostatic edema, pneumonia, acute eosinophilic pneumonia
COP	OP	Patchy bilateral consolidation	Subpleural / peribronchial	Patchy consolidation and/or nodules	Infection, vasculitis, sarcoidosis, alveolar carcinoma, lymphoma, eosinophilic pneumonia, NSIP
NSIP	NSIP	Ground glass & reticular opacity	Periph, subpleural, basal, symmetric	Ground glass attenuation, irregular lines, consolidation	UIP, DIP, COP, hypersensitivity pneumonia
LIP	LIP	Reticular opacities, nodules	Diffuse	Centrilobular nodules, ground glass attenuation, septal & bronchovascular thickening, thin walled cysts	Sarcoidosis, lymphangitic carcinoma, Langerhans' cell histiocytosis

