

## INDICATIONS FOR USE OF GLUCOCORTICOSTEROIDS IN MANAGEMENT OF PATIENTS WITH PULMONARY SARCOIDOSIS

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### *Abstract*

Indications for use of glucocorticosteroids in patients with bronchopulmonary lymph nodes and lung sarcoidosis (stage II) remain disputable. Usually, corticosteroid therapy in this group of patients is administered under the presence of clinical symptoms and/or disturbances of lung function or hypercalcemia.

The rate and the character of clinical symptoms, lung function disturbances and hypercalcemia were analyzed on 146 cases of pulmonary sarcoidosis with lung lesions. It was established that in vast majority of patients (90 %) there were clear indications for corticosteroid therapy.

A comparative analysis of the outcomes after three months in no treatment stage II asymptomatic sarcoidosis patients (52 patients) and stage II symptomatic sarcoidosis patients on corticosteroid therapy (86 patients) was performed.

In asymptomatic stage II sarcoidosis patients after three months follow-up period the rate of spontaneous regression was observed in only 32,7 % of cases; no changes — in 30,8 %; progression — in 36,5 %.

In symptomatic stage II sarcoidosis patients or those with pulmonary function/diffusion disturbances after three months corticosteroid treatment the regression was achieved in majority of patients (80,2 %); stabilization — in 15,1 %; progression — in only 4,7 %.

A significant number of progressing pulmonary sarcoidosis cases when corticosteroid therapy have not been started confirms the need in urgent administration of glucocorticosteroids at the first visit regardless of presence or absence of clinical symptoms, lung function disturbances or hypercalcemia.

**Key words:** pulmonary sarcoidosis, glucocorticosteroids, indications for use.

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