

# THE HISTORY OF THE STUDY OF SARCOIDOSIS

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*Abstract*

Sarcoidosis is defined as a multisystem disease of unknown etiology characterized by non-necrotic epithelioid granulomas that most commonly affect the lymph nodes, lungs, skin, and eyes. The disease is characterized by multiple sources of uncertainty: limited awareness of the disease, delayed diagnosis, unpredictable efficacy and toxicity of therapy, and disease progression and mortality, which contribute to delays in care and poor disease control.

The aim was to research the history of the sarcoidosis knowledge according to literature data.

Sarcoidosis, a systemic granulomatous disease, was first described in its cutaneous form in 1869 and was considered a dermatological pathology for almost half a century. From the late 1910s to the early 1920s, it became clear that sarcoidosis can affect all organ systems. A systematic description of the disease was not made until 1937, but interest in sarcoidosis increased dramatically with the establishment of specialized sarcoidosis clinics in the 1950s and 1960s and the introduction of glucocorticosteroids as a treatment modality. Over the next 40 years, the basic aspects of the immunology of sarcoidosis, its natural history, and the role of therapy were partially elucidated. Unfortunately, little changed for the individual patient during the second half of the 20th century, neither in terms of treatment outcomes nor in terms of disease outcomes. Over the past 25 years, sarcoidosis research has continued, including its epidemiology, etiopathogenesis, impact on quality of life and mortality risk, complications, and treatment paradigm that is rapidly moving away from corticosteroids. The systemic disease sarcoidosis remains a pathology primarily recognized and diagnosed by pulmonologists, as lung involvement remains the most common.

**Key words:** sarcoidosis, clinical presentation, extrapulmonary involvement, diagnostic approach, history of pulmonology.

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