



# **Continuing Professional Development Interstitial Lung Diseases**

# Module 1. Immunology and defence mechanisms

- 1. Anatomical barriers
- 2. Reflex mechanisms (sneezing, cough and dyspnoea)
- 3. Mucociliary clearance and fluid homeostasis
- 4. Innate defence molecules
- 5. Professional phagocytes/antigen-presenting cells
- 6. Adaptive immunity and cytokine/chemokine production
- 7. Granuloma formation
- 8. Basics of fibrogenesis

## Module 2. Control of breathing

- 1. Control systems
- 2. Peripheral chemoreceptors
- 3. Central chemoreceptors
- 4. Testing the control system
- 5. Ventilatory responses to CO<sub>2</sub>
- 6. The hypoxic ventilatory response
- 7. Interaction between hypoxic and hypercapnic responses
- 8. Disturbances in the control of breathing
- 9. Control of breathing in pulmonary diseases
- 10. Type 1 and type 2 respiratory failure
- 11. Respiratory stimulants

#### Module 3. Control of ventilation

- 1. Ventilatory response to inhaled carbon dioxide
- 2. Estimation of the ventilatory response to hypoxia
- 3. Respiratory muscles

## Module 4. Respiratory mechanics

- 1. Airway resistance
- 2. Body plethysmography
- 3. Interrupter technique
- 4. Forced oscillation technique
- 5. Lung compliance
- 6. Measurement of respiratory mechanics (total lung capacity with He (TLC He), total lung capacity with plethysmography (TLC pleth) and total lung capacity with N<sub>2</sub> (TLC N<sub>2</sub>)) and the usefulness of the alveolar volume (AV)/total lung capacity (TLC) ratio
- 7. Respiratory muscle strength: maximum inspiratory power, maximum expiratory power and sniff nasal inspiratory power

#### Module 5. Gas exchange

- 1. Transfer factor of the lung for carbon monoxide (TLCO)
- 2. Definition
- 3. Technique
- 4. Calculation of TLCO and measurement of the carbon monoxide transfer coefficient (KCO)
- 5. Transfer factor of the lung for nitric oxide (TLNO) and TLCO/TLNO measurement

## Module 6. Arterial blood gas (ABG) and acid-base status assessment

- 1. Step 1: evaluation of the utility of ABG and capillary blood gas
- 2. Step 2: diagnosis of A-B disorders: Henderson-Hasselbalch equation and the relationship between partial pressure of oxygen (PO<sub>2</sub>), partial pressure of carbon dioxide (PCO<sub>2</sub>) and pH





	INSTITIAL DISEASES				
3.	Step 3: more on A-B disorders: importance of the D(A-a) difference, fraction of inspired oxygen				
	(FiO <sub>2</sub> ) the alveolar gas equation and measuring oxygen shunts				
M	Module 7. Exercise testing				
1.	Exercise protocols				
2.	Maximal incremental text				
3.	Constant work rate tests				
4.	Walking tests				
	Indications for and basic interpretation of cardiopulmonary exercise testing				
	Exercise variables and indexes				
	odule 8. Lung function tests				
1.	Interpreting lung volume				
	Grading the severity of airflow obstruction or restriction after adoption of Z scores				
	odule 9. Symptoms				
1.	General symptoms of interstitial lung disease (ILD) and extrapulmonary involvement in some ILDs				
	such as sarcoidosis and connective tissue disease (CTD)-associated ILD (CTD-ILD)				
2.	Vasculitides, extrapulmonary involvement and ILDs				
3.	CTD				
	Rare lung diseases such as lymphangioleiomyomatosis (LAM)				
	odule 10. Signs				
1.	Velcro and extrapulmonary signs/symptoms				
2.	Signs of right heart failure and pulmonary hypertension				
M	odule 11. Syndrome-based approach				
1.	Diagnosis and differential diagnosis ( <i>i.e.</i> Hepato-pulmonary syndrome, telomeropathies, sarcoidosis				
	aspects, Hermansky-Pudlak syndrome, Niemann-Pick disease and Gaucher disease)				
2.	CTD features				
	Haematological diseases				
4.	Occupational disease				
	Pulmo-renal syndromes				
<i>6</i> .	Genetic testing in ILDs				
	odule 12. Endoscopic technique items				
	Bronchoalveolar lavage/bronchial biopsy and forceps transbronchial lung biopsy				
	Cryobiopsy technique including complications of transbronchial cryobiopsy				
	odule 13. Endobronchial ultrasound (EBUS) and endoscopic ultrasound (EUS)				
1.	Indications and contraindications for EBUS and EUS				
	Sample processing and rapid on-site evaluation				
	odule 14. Surgical lung biopsy				
1.	Indications				
2.	Contraindications				
3.	Complications				
	odule 15. Chest X-ray				
1.	Limitations and indications of chest X-rays				
2.	Basic interpretation of chest radiographs				
3.	Radiological correlates of chest organs and bony chest structures				
4.	Describing radiological findings of a chest radiograph				
5.	Recognition of abnormal results and formulation of a diagnosis				
Module 16. Thoracic ultrasound					
1.	Early detection				
2.	Ultrasound appearance				
	odule 17. Computed tomography (CT) scan				
1	Technique of multi-slice thickness CT (high resolution CT "HRCT") for ILD diagnostics				
1.					





	JISEASES	
	Patterns and differential diagnosis	
3.	Computer-based quantification	
	dule 18. Systemic pharmacotherapy	
1.	Steroids and immunomodulators used to treat ILD	
2.	Antifibrotic drugs for pulmonary fibrosis	
Mo	dule 19. Respiratory physiotherapy	
1.	Indications, limitations and role of respiratory physiotherapy in ILD	
Mo	dule 20. Pulmonary rehabilitation	
1.	Indications, limitations and role of pulmonary rehabilitation in ILD	
Mo	dule 21. Palliative care	
1.	Principles of palliative care	
	Early integration of palliative care, multidisciplinary care and communication	
Mo	dule 22. Oxygen therapy	
	Prescription according to current statements and guidelines	
	Criteria for long-term oxygen therapy (LTOT) in patients with ILD	
	Ambulatory oxygen	
	dule 23. Preventative measures	
	General aspects of preventative measures (vaccination, sports, <i>etc.</i> )	
	Dietary measure	
	Exercise	
	Influenza vaccination	
	Pneumococcal vaccination	
	SarsCoV2 vaccination	
	Specific preventative management	
	Smoking cessation	
	dule 24. Assisted ventilation	
	Limitations of assisted ventilation in advanced cases	
	High-flow oxygen	
	Extracorporeal membrane oxygenation	
	High-frequency oscillatory ventilation	
	CPAP in OSA/ILD overlap	
-	dule 25. Lung transplantation	
	Indications and contraindications for lung transplantation	
	Indications for early referral	
	Indications for lung transplantation in patients with systemic diseases	
	Challenges around pharmacotherapy in ILD and transplant	
	dule 26. Differential diagnosis	
	Differential diagnosis of respiratory emergencies	
	Acute exacerbation of fibrosing ILDs	
	dule 27. Immediate management steps of respiratory emergencies	
	Early referral to a specialist ILD centre	
	Multidisciplinary diagnosis for ILD	
	dule 28. Diffuse parenchymal lung disorders manifesting with acute lung injury	
Module 29. Idiopathic pulmonary fibrosis (IPF)		
	Clinical aspects	
	Diagnostic aspects	
	Treatment of IPF	
	Acute exacerbation of IPF in patients already known to be affected by IPF	
	Identification of patients with IPF and significant emphysema	
5.	identification of patients with IFF and significant emphyseina	





5.1. CT scan features         5.2. Pulmonary function tests focusing on the discrepancy between volume preservation and significant reduction of carbon monoxide diffusing capacity (DLCO)         Module 30. Lung cancer         1. General aspects of lung cancer         2. Lung cancer in the context of ILD         3. Immunotherapy and ILD         Module 31. Actute respiratory failure         1. ILD appearing with acute respiratory failure         2. Differential diagnosis         3. Diagnostic approaches         4. Treatment         Module 31. Acuter respiratory failure         1. ILD appearing with acute respiratory failure         2. Diagnostic modality         3. Treatment of different subtypes, including life-threatening organ involvement (heart, central nervous system, hypercalcentia and others)         Module 31. Altiopathic interstitial pneumonias beyond IPF         1. diopathic interstitial pneumonias including cryptogenic organising pneumonia of unknown actiology/bronchiolitis obliterans organising pneumonia         2. Smoking-related idiopathic interstitial pneumonia and Combined Pulmonary Fibrosis and Emphysema (CPFE)         3. I Diseases with PF-ILD         5.1. Diseases with PF-ILD         5.2. Treatment of PF-1LD         Module 35. CTD-ILD         1. CTD-1LD a clinical overview         2. Treatment         Module 35. Langerhans cell histiocytosis     <		ERSTITIAL DISEASES
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## Module 53. Acute inhalation injuries and their possible sequelae

- 1. General aspects of acute inhalation injuries and their possible sequelae
- 2. Identification of smoke inhalation and burns as causes of respiratory failure
- 3. Assessment of the degree of severity of pulmonary involvement
- 4. Optimal treatment of inhalation injury, including systemic effects

#### Module 54. ILD caused by dusts of biologic origin (including extrinsic allergic alveolitis)

1. General aspects of ILD caused by dusts of biologic origin

#### Module 55. Asbestos-related conditions

1. General aspects of asbestos-related conditions other than bronchopulmonary cancer (but including mesothelioma)

# Module 56. Epidemiological and statistical methods for critical appraisal

1. General aspects of epidemiological and statistical methods for critical appraisal