

Get the facts about PF

Pulmonary Fibrosis

MYTHS BUSTED

Idiopathic pulmonary fibrosis is the same as interstitial lung disease

FACT: Interstitial lung disease, or ILD, refers to a large family of lung disorders that tend to have similar abnormalities and symptoms. Some types of ILD can be secondary to another disease, such as rheumatoid arthritis, or a result of an environmental exposure, such as asbestos. Other types have no identifiable cause, in which case they are referred to as idiopathic. One specific type of ILD without a known cause is idiopathic pulmonary fibrosis (IPF). IPF is one type of ILD, but not every type of ILD is IPF (there are more than 200).

IPF is only caused by smoking

FACT: There are no direct links to smoking and getting IPF. In fact, IPF occurs in never-smokers. However, smoking appears to be a risk factor for developing IPF, meaning it can be an indicator to look for IPF. Many patients diagnosed with IPF do have a history of smoking tobacco.



There is no treatment for IPF

FACT: There is no cure for IPF. However, some treatments may help improve symptoms or slow down progression of the disease. Two medicines, pirfenidone (Esbriet®) and nintedanib (Ofev®), have been approved by the U.S. Food and Drug Administration (FDA) for use in patients with IPF. These drugs have been shown to slow the decline of lung function tests. They may decrease hospitalizations due to flare-ups of the disease. There are also therapies, such as supplemental oxygen and pulmonary rehabilitation, that can help manage the symptoms. In the most severe cases, patients with IPF may qualify for a lung transplant.

My doctor says I have PF, so that means I have IPF

FACT: PF is condition of scarring of the lungs. Many types of ILD other than PF or IPF can lead to scarring in the lungs. It is important for your doctor to determine the cause or underlying condition, if identifiable, or if your pulmonary fibrosis is idiopathic because treatments and prognoses for all different forms of ILD will differ.



To learn more about pulmonary fibrosis and idiopathic pulmonary fibrosis, go to chestfoundation.org/pf



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IPF is easy to diagnose

FACT: IPF symptoms are very similar to symptoms of other lung diseases, such as asthma, COPD, or even heart failure and other diseases that cause scarring in the lungs. It may take years before an accurate diagnosis of IPF is finally made. Half of cases are initially misdiagnosed. That's why it is so important to track your symptoms, so you can be properly diagnosed. A wide variety of tests need to be done, including extensive occupational, environmental, and social tests, before a confident diagnosis of IPF can be made.



I have been diagnosed with IPF, so I only have 3 years to live

FACT: There is a lot of misleading and false information about IPF on the internet. Many sites claim that an IPF diagnosis means you only have 3 years to live. The truth is that while half of patients diagnosed with IPF may live less than 3 years, half may live more than 3 years. It is hard to predict how IPF will progress in an individual patient: sometimes it progresses quickly, sometimes slowly, or slowly at first then faster later. Some patients have survived more than 10 years with their disease even without receiving medications or having a lung transplant.

There is no way to know how my PF will progress

FACT: Patients with PF typically follow three main paths: stable condition, progressive decline, or rapid decline. The speed of IPF progression varies from patient to patient, but there are some predictors of your individual condition, such as how short of breath you are or how much fibrosis is on your high-resolution computed tomography (HRCT) scan at diagnosis. Close monitoring of your lung function can give a better sense of what the future may hold.



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