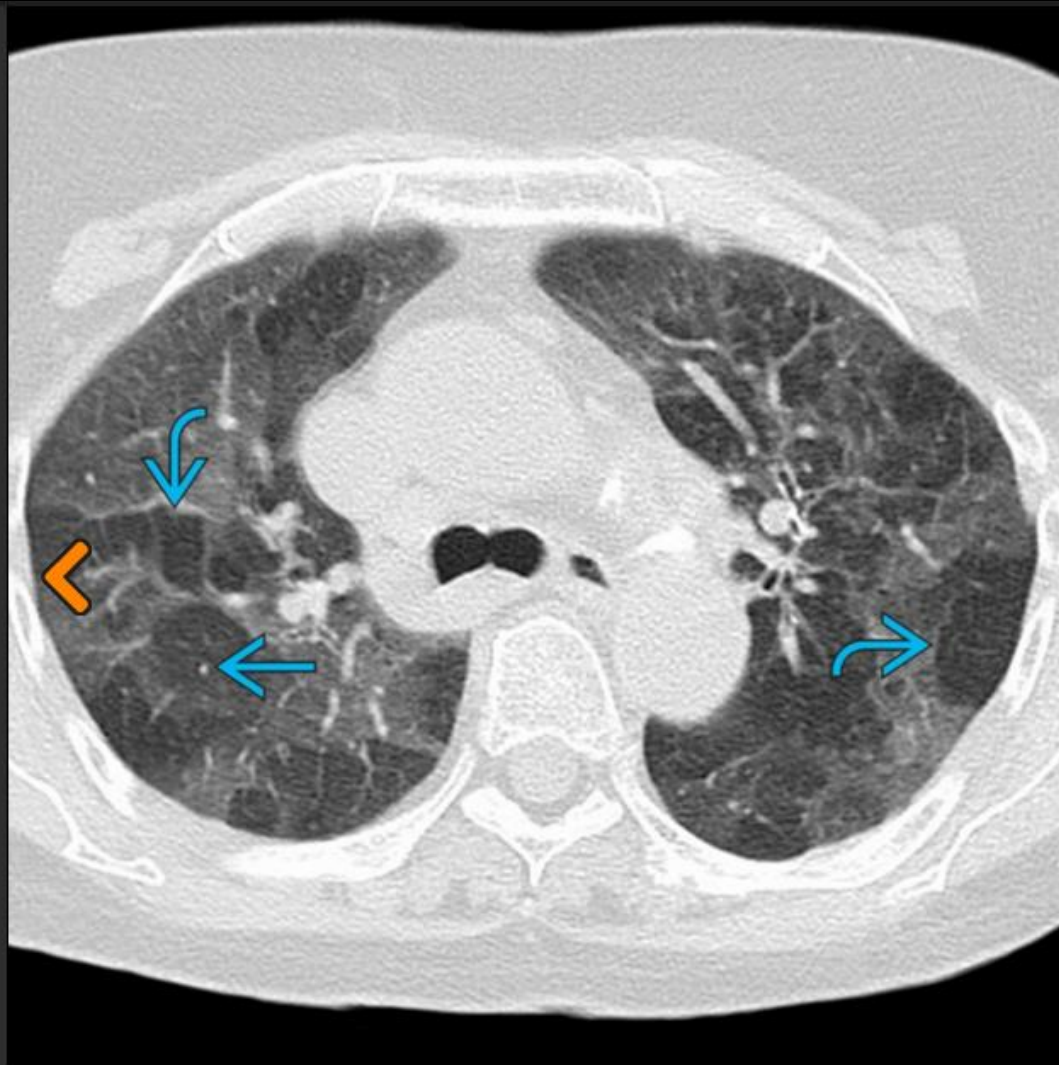


Obliterative Bronchiolitis



- Also known as **bronchiolitis obliterans** or **Constrictive bronchiolitis**
- Type of bronchiolitis and refers to bronchiolar inflammation with submucosal peribronchial fibrosis associated with luminal stenosis and occlusions.
- OB should not be confused with bronchiolitis obliterans organizing pneumonia (BOOP).

HRCT

- Inspiratory and expiratory imaging essential
- Mosaic attenuation
- Air-trapping on expiratory HRCT
 - Patchy, lobular, segmental, occasionally lobar
- Minimum intensity projection (minIP)
reformations improve detection of lobular areas of decreased attenuation
- Extent of air-trapping correlates with severity of airflow obstruction on pulmonary function studies



[View Full Screen Image](#)

Axial expiratory HRCT of the same patient demonstrates diffuse, bilateral mosaic attenuation and multifocal, bilateral expiratory air-trapping . The small vessel caliber within areas of air-trapping correlates with hypoxic vasoconstriction .

Obliterative Bronchiolitis

- Constrictive bronchiolitis, is an irreversible fibrosis of small airway walls that narrows or obliterates the lumen, leading to chronic airway obstruction.
- Most common causes include
 - Infection (viral, bacterial, mycoplasma),
 - Inhalation of toxic fumes,
 - Drug treatment (penicillamine or gold),
 - Collagen vascular disease (rheumatoid arthritis, especially after the therapies mentioned),
 - Chronic lung transplant rejection, bone marrow transplantation with chronic graft-versus-host disease.
- Nevertheless, obliterative bronchiolitis is often idiopathic

