A multicenter, prospective, blinded comparison of local histopathology and central pathology panel diagnoses in ILD

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Presented at the
2016 ATS International Conference

May 13-18, 2016
San Francisco, California
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Disclosure of Commercial Support and Relevant Financial Interests: Veracyte, Inc. provided all commercial support for the research presented in this study. Urooj Imtiaz, Katie Cleveland, Shella Edejer, Pauline Bianchi, Yoonha Choi, Dan Pankratz, Arq Huang and Giulia Kennedy are employees and shareholders of Veracyte, Inc.

BACKGROUND

Diagnosis of interstitial lung disease (ILD) ideally requires multidisciplinary evaluation of clinical history, radiographic images, and often will be accompanied by histopathologic data from surgical lung biopsies. When radiology is ambiguous, histopathology may provide essential information to diagnose ILDs. A Usual Interstitial Pneumonia (UIP) pattern histologically or radiologically is required for a diagnosis of IPF diagnosis, which is associated with a much poorer prognosis compared to other ILDs.

METHODS

In a prospective, IRB-approved, sample-collection clinical protocol we collected a data set of 127 histopathology biopsy samples from 70 patients with ILD (BRAVE Trial) who underwent surgical lung biopsy, cryobiopsy, or transbronchial biopsy. Local histopathology diagnoses was annotated from the clinical records.

The ATS/ERS 2013 pathology criteria were used, with prospectively documented modifications to ensure consistency across reviewers and sample types. The Central Pathology Categorical Subtypes

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REFERENCES