

REGULAR MEETINGS

ISARC Support Group meets at 7.30pm on the first Wednesday of every second month in the Conference Room, Health Centre, Arden Road, Tullamore, Co. Offaly.

For further information please write to:

ISARC, Gurtacur, Mount Bolus, Tullamore, Co. Offaly.
Visit: www.isarc.ie or email: info@isarc.ie

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ISARC is the Irish Sarcoidosis Support Network based in Tullamore, Co. Offaly for sufferers, families and carers affected by sarcoidosis.

Despite the high incidence of sarcoidosis, relatively little is known about the disease. It is with this in mind that ISARC aims to:

- Bring fellow sufferers together to support each other and their families.
- To provide and share information and experiences, acting as a forum to help those affected to understand the condition.
- To support the medical profession in the early diagnosis and treatment of those with the disease.
- To heighten awareness of the disease.

ISARC provides bi-monthly meetings, quarterly newsletters and annual meetings with consultants and others specializing in this disease.

Membership is open to the public, particularly those affected by sarcoidosis, their families and friends, health professionals and anyone interested in aiding the work of the Support Network.

Funded by the Irish Lung Foundation



GURTACUR, MOUNT BOLUS, TULLAMORE, CO. OFFALY.

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SARCOIDOSIS



ISARC

IRISH SARCOIDOSIS SUPPORT NETWORK



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WHAT IS SARCOIDOSIS?

Sarcoidosis is a disease which can affect any organ of the body, although it most commonly affects the lungs, eyes, lymph nodes and skin.

The body's immune system generally protects against foreign and harmful substances, for example viruses, bacteria and chemicals. The body ordinarily responds by releasing white blood cells to the affected organ. These cells produce chemicals that cause inflammation to break up and destroy the foreign particles.

Sarcoidosis is thought to occur as a result of an abnormal immune response where the body believes itself to be under attack and triggers an immune reaction. An excess build up of white blood cells leads to the formation of granulomas on the affected organ. Granulomas are clusters of these defensive cells that grow together to form lumps. They can impair the function of the organ thus causing the symptoms of sarcoidosis. These granulomas usually resolve on their own or following medication, however in a small number of cases permanent scarring (fibrosis) can occur which is why early detection and treatment of sarcoidosis is important.

Sarcoidosis is not a cancerous or contagious disease.

WHAT CAUSES SARCOIDOSIS?

The cause of sarcoidosis is unknown and current research is directed towards identifying which factors may trigger the disease. Genetic and environmental factors are of particular interest in addition to infectious agents.

WHO CAN GET IT?

Worldwide it affects 1 - 2 in every 10,000 people, however Ireland has a much higher incidence.

It is most often diagnosed in young adults between the ages of 20 and 40 years although it can also affect older and younger people. It affects both sexes, but is more common amongst women.

Sarcoidosis affects all races. The disease is however more prevalent amongst those of African American, Irish, German, Puerto Rican and Scandinavian origin.

THE COMMON SYMPTOMS

Symptoms of sarcoidosis are generally variable. Some people with sarcoidosis will have no symptoms of the disease. Symptoms can often occur quite suddenly (acute sarcoidosis) or slowly over a number of years (chronic sarcoidosis). Symptoms will depend on which organs are affected but the most common are:

- Tiredness, fatigue and weakness
- Loss of appetite or weight
- Joint and muscle pain
- Enlarged lymph glands
- Dry cough
- Shortness of breath
- Wheezing
- Red eyes with itching or blurring
- Skin rash which may itch but is not painful
- Fever
- Night sweats

HOW IS SARCOIDOSIS DIAGNOSED

Sarcoidosis is a difficult disease to diagnose as the symptoms can be very similar to other diseases such as tuberculosis, lupus, arthritis and ME (myalgic encephalopathy).

Whilst there is no definitive test for sarcoidosis, a detailed medical history and physical examination by your doctor can lead to further diagnostic tests such as:

- Chest X-ray - This may identify enlarged glands or shadowing within the lungs.
- Blood Tests - To analyse blood cells and how they are functioning. Angiotensin-Converting Enzyme (ACE) is specifically monitored as granulomas secrete ACE and levels are generally raised in patients with sarcoidosis.
- Pulmonary Function Tests (Lung Function Test) - To show how well the lungs are working.
- Computerised Tomography (CT) Scan - Which gives a more detailed picture of organs.
- Biopsy - Where a small piece of tissue is taken from the affected organ and examined under a microscope for granuloma formation.
- Bronchoscopy - A routine and generally uncomplicated investigation of the airways is undertaken. A small tube is passed through the mouth or nose into the lungs. Often a biopsy is taken during this procedure.
- Eye examination - Using a slit lamp, to examine the inside of the eye.

TREATMENT OF SARCOIDOSIS

Treatment will vary depending on how severe the symptoms are. The majority of patients require no treatment and rest is generally advised. Others may only require aspirin or anti-inflammatories for aches and pains or eye drops for eye symptoms.

Patients who have significant symptoms are normally treated with steroids. The dose of steroids will relate to the severity of the symptoms. Steroids are very effective in treating the symptoms of sarcoidosis by reducing the number of granulomas formed and improving organ function. They are powerful drugs that can lead to side effects which are normally monitored and managed by your doctor. Do not stop taking steroids suddenly without medical advice as this can result in flare-ups of the disease and other potential health problems.

Most people with sarcoidosis will lead a normal and healthy lifestyle. Patients with Sarcoidosis should be regularly monitored for changes in their condition to determine if the disease is progressing.



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