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### La participacion pleural en la asbestosis pulmonarThe pleural participation in pulmonary asbestosis

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#### Resumen

La pleura participa de un modo constante en la fibrosis pulmonar progresiva de la asbestosis. La fibrosis pleural se manifiesta de un modo difuso o en forma de placas hialinas, que llegan a calcificarse, y la genera cualquiera de los tipos comerciales de amianto. Las placas se desarrollan de un modo exclusivo en la hoja parietal de la serosa, sin que se establezca s3nfisis entre las dos hojas pleurales. Esta fibrosis pleural, tanto difusa como segmentaria, en placas, se desarrolla insidiosamente, paso a paso, sin un s3ndrome agudo, ostensible, de exudaci3n, por lo que habitualmente s3lo llegamos a percibirla por sus manifestaciones radiol3gicas en las cisuras y senos pleurales y en el diafragma. Para su demostraci3n ha de preferirse un r3gimen radiol3gico de alto voltaje, superior a 100 kV, siendo imprescindible la incidencia oblicua, derecha o izquierda, a 45 grados.

Según nuestra experiencia, en no menos del 75 por 100 de los enfermos asbestóticos indemnizables laboralmente, y coexistiendo en la fibrosis pulmonar, se demuestra fibrosis pleural en forma de anomalías de la silueta diafragmática, de cisuritis, de bandas paralelas a la pared torácica o de placas calcáreas de distinta forma y magnitud. El llamado corazón hirsuto o veloso es de presentación más rara, aproximadamente en 10 por 100 de los casos.

La importancia concedida a estas manifestaciones pleurales de la asbestosis la demuestra el que su notación es obligatoria en la Clasificación Internacional de Radiografías de las Neumoconiosis desde octubre del año 1967, fecha de la conocida reunión de Cincinnati. La notación allí propuesta fue la siguiente: pl significa engrosamiento pleural, pie, equivale a calcificación de la pleura y co, corazón hirsuto o veloso, continuando válidos tales signos en la clasificación vigente hoy día, que es conocida como B.I.T./U.C., 1971.

## Summary

The pleura takes an important role in the progressive pulmonary fibrosis in asbestosis. Pleural fibrosis could be diffuse or appears in the form of hyaline plates which become calcified. It is produced by any of the commercial types of amianthus. The plates develop only on the parietal pleural layer without any attachment between the two pleural layers. Pleural fibrosis in plates, both diffuse and segmentary, develops slowly without there being an acute exudate syndrome. For this reason it is rarely detected except by its roentgenological manifestations on the costophrenic angles. A radiological high-voltage higher than 100 kw must be used, and at an oblique incidence of 45 degrees to right or left.

In our experience, in no less than 75 percent of patients with asbestosis and diffuse pulmonary fibrosis, various pleural abnormalities can be shown as obliteration of the costophrenic angles, thickened interlobar septums, and pleural calcifications. The shaggy heart shadow is rare, appearing in about 10 percent of cases.

The notation proposed in the International Classification of Roentgenographic Pattern of Pneumoconiosis since October of 1967, date of the well-known meeting in Cincinnati, is the following: pl indicates pleural enlargement; plc pleural calcification; and co shaggy heart. All of these signs are still valid in the classification used today known as B.I.T./U.C., 1971.



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