5. Article Title: "Relationship of Environmental Exposures to the Clinical Phenotype of Sarcoidosis"

   Lead Author: Mary Elizabeth Kreider, MD

   Article Journal: Chest. July 2005; Vol. 128 (Issue 1): pp. 207-215.

As noted above, certain exposures in a person's home or work environment have been linked to sarcoidosis in previous research. In addition to asking whether sarcoidosis subjects were more likely to have been exposed to certain substances than their matched controls, we also asked whether people with different symptoms or manifestations of sarcoidosis were more likely to have been exposed to certain exposures than people with other kinds of sarcoidosis. In particular, were study participants whose sarcoidosis only affected their lungs more likely to have had an inhalational (breathed in) exposure than study participants with other organs involved with sarcoidosis (for instance, the liver, skin, or eyes)?

We found that people with lung only involvement of their sarcoidosis were more likely to have been exposed to wood smoke and agricultural organic dusts (for instance, farming, working with animals, exposure to vegetable dusts, or raising birds). Race was also important. African-American participants with lung only sarcoidosis reported more wood smoke exposure and Caucasian participants with lung only sarcoidosis reported more agricultural organic dust exposure in comparison to the participants with systemic sarcoidosis. This suggests that how one is exposed to environmental agents may affect the type of sarcoidosis they develop. This study does not prove that these agents are the cause of sarcoidosis but merely may affect what form of sarcoidosis a patient may develop.

6. Article Title: "Recovery of cell wall-deficient organisms from blood does not distinguish between patients with sarcoidosis and control subjects"

   Lead Author: Sheldon Brown, MD

   Article Journal: Chest. February 2003; Vol. 123 (Issue 2): pp. 413-417.

In an ACCESS substudy, blood obtained from 197 patients with sarcoidosis and 150 control participants without sarcoidosis were studied. Because past research has suggested that the cause of sarcoidosis might possibly be a form of bacteria (called mycobacteria), the investigators looked in the blood for a kind of bacteria called "cell-wall deficient (CWD) mycobacteria". Previous studies of small numbers of sarcoidosis patients have reported growth of this type of bacteria in sarcoidosis patients.

In this ACCESS substudy, mycobacteria could not be found in the blood of sarcoidosis participants. It is still possible that bacteria are involved in the cause of sarcoidosis. Future studies may need to look for bacteria in the organs of people with sarcoidosis instead of in their blood.