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# The perpetual enigma of bronchoalveolar lavage fluid lymphocytosis in chronic hypersensitivity pneumonitis: is it of diagnostic value?

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**A marked increase in BAL lymphocyte percentage is of additional value in distinguishing cHP from other forms of fibrotic ILD** <https://bit.ly/3ciR8zG>

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Since its introduction in the 1970s, bronchoalveolar lavage (BAL) has been increasingly recognised as a low-risk investigational tool, providing information of diagnostic and, potentially, prognostic value in several fields of pulmonary medicine, especially in interstitial lung disease (ILD) [1]. In some ultrarare ILDs, such as pulmonary alveolar proteinosis, BAL findings are highly specific and diagnostic, whereas in the more common ILDs they are nonspecific and cannot provide a confident diagnosis as a standalone test. However, when BAL cellular analysis is interpreted in the context of clinical and high-resolution computed tomography (HRCT) findings and in an experienced multidisciplinary discussion (MDD) setting, it may contribute to narrowing the differential diagnosis and help to avoid surgical lung biopsy.