## Abstract

Rheumatoid arthritis associated interstitial lung disease (RA-ILD) is the most common pulmonary manifestation of rheumatoid arthritis with an average survival rate of less than three years. Pulminary fibrosis in rheumatoid arthritis is also linked with methotrexate (MTX).The MTX associated lung disease is known as MTX-pneumonitis that has a acute / sub acute course. Both conditions should be differentiated from each other to ensure the optimal treatment of rheumatoid arthritis. Currently recommended treatment for RA-ILD is glucocorticoids. Steroid sparing agents are being used as add-on medications although there is lack of strong evidences for the benefit. MTX-pneumonitis is conventionally treated with immediate cessation of methotrexate and glucocorticoids. Recent evidences suggest that methotrexate may have long term benefit in rheumatoid arthritis with the protective effect from developing RA-ILD.