Abstract

In this case report, we present a unique instance of Pulmonary Alveolar Proteinosis (PAP) in a young female patient, challenging the typical demographic and clinical profiles of the condition. Despite an unconventional presentation, a comprehensive diagnostic approach, including clinical history, radiological assessments, and cytological analysis, led to a precise PAP diagnosis. Successful whole lung lavage (WLL) treatment resulted in significant clinical improvement. This case emphasizes the need to consider PAP as a potential diagnosis, even in cases that do not conform to expected clinical and radiological patterns, highlighting the importance of ongoing research and vigilance in managing this rare condition.