

## **Abstract**

Sarcoidosis is a persistent granulomatous disease that affects multiple body systems, and its mechanism is poorly understood. However it primarily targets the lungs. Typically, pulmonary sarcoidosis manifests with constitutional symptoms and shortness of breath. Chest x-rays often reveal bilateral symmetric hilar lymphadenopathy and bilateral symmetric micronodules arranged in a peribronchovascular pattern is seen on computed tomography, with an upper and middle lung zone predominance. In the early stages, patients with pulmonary sarcoidosis might be asymptomatic, but as the condition progresses, many report symptoms such as cough, dyspnea, fatigue, unintentional weight loss, and night sweats.

This case report highlights an instance of advanced pulmonary sarcoidosis that exhibited minimal pulmonary signs and symptoms, along with nonspecific constitutional features, persisting for several years. Upon evaluation at our unit, the diagnosis was confirmed but the patient had normocalcemic normocalciuria, which is uncommon, as documented in the literature. Notably, the patient achieved a good recovery with the administration of steroids.