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**Body:** Introduction: Idiopathic pulmonary fibrosis (IPF) is a poor prognostic fibrotic lung disease with unknown etiologies. Pirfenidone (PFD) was recently reported to decrease the rate of decline in vital capacity and it is anticipated that PFD improves prognosis of IPF patients. Aim: We prospectively examined clinical findings of IPF to predict the effects and adverse effects of PFD. Subjects: PFD was administered to 41 cases of IPF between January 2009 and December 2010. Severity stage (I/II/III/IV) of IPF defined by Japanese Respiratory Society (JRS) were 9/6/9/17, respectively. PFD was discontinued within 3 months because of adverse effects or death in 11 cases. Effects of PFD were evaluated by definition by JRS in 30 cases treated with PFD for more than 3 months. Adverse effects were evaluated in all cases. Method: Chi square test for univariate analysis and multivariate logistic regression analysis was performed using various clinical findings to clarify the predictor of short-term effects of PFD and its adverse effects, especially appetite loss and/or nausea. Results: Improvement after PFD therapy was observed in 6 cases (20%). Severity stage I/II and diagnosis of IPF based on surgical biopsy specimens were significant predictors of improvement by chi square test and multivariate analysis. Appetite loss and/or nausea occurred more in IPF patients with older age (>68 yrs) and without intake of proton-pomp inhibitor (PPI) by multivariate logistic regression analysis. Conclusions: Effects of PFD is better in IPF patients with severity stage I/II and/or diagnosed by histologically. Appetite loss and/or nausea significantly associated with older age and no PPI intake.