Correspondence

Exercise-induced asthma without respiratory heat loss

Sir,—We read with interest the case report by Dr I Ben-Dov and colleagues entitled "Exercise-induced asthma without respiratory heat loss" (August 1982, p 630). Their observations are consistent with our own data1 showing that bronchoconstriction occurs without respiratory heat loss in patients breathing ultrasonically nebulised distilled water, even if tidal breathing alone is employed.

We believe that this response is directly related to the inhalation of water in the form of droplets, and we would suggest that this rather than exercise was the stimulus to bronchoconstriction under the humidified conditions used by these authors. Previous work has shown that isotonic saline does not provoke bronchoconstriction,2 and the tonicity of inhaled fluids may have important implications for the variation in response to exercise under different climatic conditions.

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1 Higenbottam T, Stokes T, Jamieson S, Hill L. A comparison of exercise, hyperventilation with cold and warm air and inhalation of fog in the provocation of asthma. Eur J Respir Dis (in press).


A copy of this letter was sent to Dr Ben-Dov and his colleagues, who reply below.

Sir—we are aware of the observations from Dr Schoeffel and her colleagues on the ability of hypotonic and hypertonic water to induce bronchospasm, but they and Dr Godden and his colleagues used ultrasonic nebulisers, which deliver very large amounts of water to the respiratory tract. We used the same simple humidifier type of nebuliser in all our previous studies in which the breathing of warm, humid air was shown to inhibit exercise-induced asthma.1 We cannot accept therefore that the water rather than the exercise caused the asthma in the present case.

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Postgraduate course in diagnostic imaging

A postgraduate course in diagnostic imaging organised by the Duke University Medical Center will be held from 25 to 29 July 1983 at Atlantic Beach, North Carolina. Designed for radiologists but open to other physicians, whether in training or in practice, the scientific sessions will broadly cover adult and paediatric diagnostic imaging, including ultrasound, computed tomography, nuclear medicine, and interventional techniques. The course is category I, 25 hours. The registration fee is $375, or $200 for those in training if accompanied by a letter from the head of department. Application should be made to Dr Donald R Kirks, Department of Radiology, Box 3834, Duke University Medical Center, Durham, North Carolina 27710, USA.
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