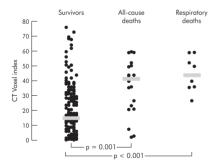


Wisia Wedzicha, Editor in Chief

CT SCANNING, DISEASE PROGRESSION AND α_1 -ANTITRYPSIN DEFICIENCY

There is now increasing evidence that CT lung density measurements may be used to follow the progression of emphysema, and in this issue of Thorax we publish two papers on the relation between CT scanning and disease progression in patients with α_1 antitrypsin deficiency. Dawkins and colleagues studied 256 patients, followed for a median period of about 2 years, and found that the upper zone expiratory scan had the best association with respiratory and all cause mortality, being better than other lung function parameters. Stolk and colleagues found that, over a 30 month follow up period, changes in lung density correlated well with changes in health status although there was no relation with changes in FEV₁. In the accompanying editorial Dirksen discusses some of the limitations and differences in the studies. He also points out the need for international recommendations on using CT lung density measurements as outcome measures for determining the progression of emphysema.

See pages 1007, 1020 and 1027



ARE ASTHMA AND OBESITY RELATED IN CHILDREN?

There has been some controversy on the exact relationship between asthma and

obesity. In this issue of *Thorax* Tantisira and colleagues describe the complex association between body mass index and asthma in children, while Schachter *et al* report on an analysis of cross sectional data from a large population of white Australian children. Schachter and colleagues found that a high body mass index was related to symptoms that may be attributable to asthma—an association that was stronger in girls than in boys—but obesity was not related to the actual prevalence of asthma. Obesity was associated with a higher prevalence of atopy in girls but not in boys. In the accompanying editorial Chinn explains the reasons for this complex interaction between asthma, atopy, sex, and obesity. However, both Chinn and Schachter *et al* stress the importance of tackling the increasing public health issue of obesity in children.

See pages 1008, 1031 and 1036

EXHALED NO REFLECTS ATOPY IN CHILDREN

In this month's issue of *Thorax*, Franklin and colleagues describe a study of exhaled nitric oxide (NO) in 11 year old children from a well characterised birth cohort and examine relationships with atopy, lung function, and airway responsiveness. The authors found that increased exhaled NO was associated with airway responsiveness and blood eosinophils only in atopic children, but no associations were found with physician diagnosed asthma or reported wheeze. Thus, exhaled NO in children reflects allergic inflammation and may be important in the link between atopy and airway responsiveness. Exhaled NO may have a useful role in the follow up of atopic children.

See page 1048

LUNG CANCER AND AIR POLLUTION

There is a difference in the incidence of lung cancer between urban and rural areas, and it has been suggested that this may be due to the effects of air pollution. In this issue of *Thorax* Nafstad and colleagues describe the long term follow up of 16 209 men living in Oslo, Norway from 1972/73 to 1988. The average exposure to nitrogen oxide at the home address from 1974 to 1978 was associated with an increased risk of developing lung cancer. As the authors point out, this study has a number of advantages in that follow up was long term, the study population lived in one city, and more than 400 lung cancers occurred during the study. However, cigarette smoking is still the most important cause of lung cancer but it is likely that air pollution also has a role.

See pages 1010 and 1071

COUGH, WOMEN AND AUTOIMMUNE DISEASE

Chronic cough takes up a significant amount of consultation time in both primary and secondary care and, in about 20% of these cases, no cause for the cough is ever found. Recent data suggest that there may be an association between idiopathic cough and organ specific autoimmune disease. In this issue of *Thorax* Birring and colleagues describe the nature of the airway and systemic lymphocytic inflammation in patients with idiopathic cough. They show that, in bronchoalveolar lavage fluid of patients with idiopathic cough, differential lymphocyte counts were higher than those in normal subjects or those with explained cough. Patients with idiopathic cough were mainly women and had a high prevalence of autoimmune disease. These intriguing observations now need further study in order to develop new treatments for this difficult condition.

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