Correspondence

Total effective time of the forced expirogram in disease

Sir,—Dr J Jordanoglou and others (*Thorax* April 1982, p 304) have proposed a method to correct for a major problem with the analysis of the spirogram in the time domain—namely, that some spirograms have an important degree of truncation when recorded: in other words, they are not asymptotic. In these cases the first moment of the spirogram α_1 , or its equivalent mean transit time or t_{eff} , is a considerable underestimate of the first moment at time ∞ , and ideally for valid between-subject and within-subject comparisons the latter should be used.

Dr Jordanoglou and his colleagues have proposed a correction for this underestimation based on the relationship between the observed FVC and a predicted value for FVC. The important point about inevitable truncation is the degree of truncation of the recorded spirogram—that is, whether or not it is asymptotic and not a notional truncation implied by a shortfall in FVC from a predicted value. The many subjects (both normal individuals and those with disease) whose spirograms are asymptotic but whose FVC differs from the predicted value will have their α_1 unnecessarily adjusted by the technique proposed by Jordanoglou and his colleagues. In those subjects who do have an important degree of truncation the relationship between recorded and predicted FVC has no bearing on the true degree of truncation.

We contend that the proposed method does not overcome this problem and may lead to further confusion concerning the analysis of the spirogram in the time domain.

MR MILLER

AC PINCOCK

*University Department of Medicine
Queen Elizabeth Hospital
Birmingham*

Notice

Third International Workshop on Respiratory Psychophysiology

The Third International Workshop on Respiratory Psychophysiology will be held in Bordeaux on 1 and 2 September 1983. The main topic will be psychophysiological approaches to bronchial asthma; but attention will also be given to normal human respiration during wakefulness and sleep (including emotional factors, stress-related changes, and biofeedback of respiratory functions) and psychosomatic aspects of hyperventilation and dyspnoea. The number of participants will be limited. Details from Professor Paul Freour, University of Bordeaux II Faculty of Medicine, 3 ter, Place de la Victoire, F-33076 Bordeaux Cédex, France (tel 56/91.34.24).