



Highlights from this issue

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The Triumvirate

This month one member of the Triumvirate spends his sabbatical in Australia and we welcome Brisbane-based Claire Wainwright as our new deputy editor of *Thorax*. What better opportunity to celebrate all things antipodean with a “Down Under” edition of *Airwaves*?

KANGAROO CHILD CARE

The baby kangaroo (or joey) spends the first 6 months of life in its mother’s pouch, safe from most natural hazards. This is not the case with the young child with cystic fibrosis (CF) who is exposed to pulmonary infection with organisms such as *Pseudomonas aeruginosa* and *Aspergillus fumigatus*. In this month’s *Thorax* (See page 740), Noor Harun and colleagues describe the risk factors for acquisition of *Aspergillus* in children with CF under 5 years. Their cross-sectional analysis of the Australasian Cystic Fibrosis Bronchoalveolar Lavage study cohort found that the number of *P. aeruginosa* eradication courses increased risk of *Aspergillus* at age 5 years (OR 1.61). *Aspergillus* causes allergic bronchopulmonary aspergillosis in some individuals with CF and so the treatment of one respiratory complication may beget another. Not so with the kangaroo where the next joey is put on hold until its older sibling emerges from its mother’s pouch.

UP A GUM TREE

The oil of the gum tree (or Eucalyptus) is sadly ineffective against *Aspergillus* though it does have other anti-microbial and anti-cancer properties. Intoxication with Eucalyptus is popularly believed to be the reason Koalas are such somnolent creatures. One wonders if consumption of Eucalyptus extracts by cancer patients might lead cause similar sleepiness to that seen in Koalas. Gum tree oil is therefore best avoided for participants in the trial of multidisciplinary

home-based rehabilitation in inoperable lung cancer described by Edbrooke *et al* (See page 787). In this trial, patients were encouraged to be as active as possible: the intervention arm received 8 weeks of aerobic and resistance exercise. There was no difference in the primary outcome (6 min walk test). However, there were improvements in quality of life and symptom severity. Time for a trial of Eucalyptus?

AUSTRALIAN PARADISE

Although the Great Barrier Reef, Cape Tribulation and Fraser Island conjures up a vision of idyllic images set in paradise, it is unlikely that such images formed the basis of the study by Michael Marcus and colleagues (See page 761). Indeed the authors used CT images from the UK Lung Cancer Screening trial to estimate the probability of cancer in lung nodules using sequential volumetric screening. The authors enrolled 1994 patients who underwent CT imaging with 1013 patients demonstrating a total of 5063 lung nodules. 2.6% of the patients developed lung cancer with a median follow-up of 4 years. The prediction model developed had important discrimination value (AUC 0.885, 95% CI 0.880 to 0.889) with internal validation suggesting the model will discriminate when applied to new data. The authors report that such imaging may allow stratification of follow-up in lung cancer screening programmes. Although impressed, the triumvirate would rather consider the images of a tropical island paradise.

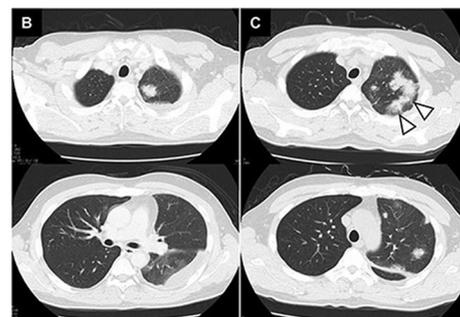
IT’S A MINE FIELD

The first edition of the Green Book reporting ‘Spontaneous Combustion in Australian Coal Mines’ was written as a reference book detailing spontaneous combustion in Australian coal mines. This was no doubt the inspiration for Constance Vuillard and colleagues

(See page 780) investigating the symptom onset and time to treatment of primary spontaneous pneumothorax. Indeed, the authors wanted to assess the effect of a longer symptom onset to needle aspiration time and its impact on outcome. The authors used a derivation and validation cohort with the primary outcome of immediate needle aspiration success (chest tube avoidance). Interestingly, a delay between the first symptom and needle aspiration (≥ 48 hours) was associated with a higher success rate (OR=13.54; 95% CI 1.37 to 133). The authors suggest that when managing primary spontaneous pneumothorax, a longer symptom onset to needle aspiration time may be beneficial. We are not sure that a delayed approach should be employed with spontaneous combustion in an Australian mine.

WALKABOUT

In Aboriginal society, Walkabout is a rite of passage where young men undertake a long journey on foot. This month’s pulmonary puzzle (See page 821) describes a similarly peripatetic consolidation.



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