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## **EDITORS' CHOICE**

- A warm welcome to our first issue as the new Editors-in-Chief of the *PCRJ*. It is a great honour for us both to take over from Dr Mark Levy following his incredibly successful 15-year period in charge of the Journal. On page 1 we pay tribute to his dedication, persistence, foresight and integrity over the last 15 years, and we set out our future plans for the *PCRJ*. We hope that our plans do justice to his legacy.
- Should we aim to diagnose and treat COPD earlier? In their comprehensive review on pg 15, Price et al. discuss the issues surrounding early stage COPD, including the challenges of diagnosis and its burden on sufferers and their families. They make a case for earlier diagnosis and treatment. However, in their thought-provoking editorial (pg 6), Enright and White respond by asserting that the case for earlier diagnosis and treatment is unwelcome and has little evidence-base to support it. What do you think? We would be delighted to receive correspondence on this highly topical issue.
- Who should look after children with asthma? On pg 84 Kuethe *et al.* report the results of an RCT to test non-inferiority of specialist nurse care versus paediatrician or GP care for 107 children with mild to moderate stable asthma. No significant differences were found between the groups, except that those children in the GP group received less frequent follow-up. Haughney sheds some light on the implications in his editorial on pg 9.
- Continuing the theme of childhood asthma, on pg 75 Thornley et al. examined the ecological association between asthma prevalence in 6-7 year-olds and per capita sugar consumption during the perinatal period in 53 countries. Using data from the ISAAC study and United Nations Food and Agriculture food balance sheets, they conclude that there is indeed an association between sugar consumption in the perinatal period and subsequent risk of severe asthma symptoms 7-8 years later...
- How should we treat allergic rhinitis and rhinosinusitis, record the details, and then search for those patients' details on our practice computers? Hoffmans *et al.* (pg 64) present the results of a questionnaire sent to 1000 GPs in the Netherlands; 96% differentiated between acute and chronic cases, but management did not always follow Dutch guidelines. Hammersley *et al.* developed and tested several search strategies used to identify patients with active seasonal allergic rhinitis (pg 71). There is a need for accurate data recording in the consultation. Levy explores some of the issues in his editorial on pg 11.
- Elsewhere in this issue, Jones and Ostrem review optimal pharmacological maintenance treatment for COPD on pg 33, Dransfield *et al.* examine the symptom burden, quality of life and co-morbid illness in 1072 patients with doctor-diagnosed COPD receiving monotherapy (pg 46), and on pg 92 Hardwell *et al.* report on the inability of patients to use pMDIs.

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