Quarterly Medical Review: Pulmonary involvement in systemic diseases

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In this issue

Pulmonary involvement in systemic diseases
Humbert M. (Clamart, France)

Lung involvement in systemic sclerosis
Hassoun P. M. (Baltimore, USA)

Pleural and pulmonary involvement in systemic lupus erythematosus
Torre O., et al. (Milan, Italy)

The lung in rheumatoid arthritis
Amital A., et al. (Petach Tikva, Israel)

Pulmonary manifestations of Sjögren’s syndrome
Hatron P.-Y., et al. (Lille, France)

Pulmonary veno-occlusive disease: the bête noire of pulmonary hypertension in connective tissue diseases?
O’Callaghan D. S., et al. (Clamart, France)

La Presse Médicale is proud to announce its decision to publish quarterly English supplements of high quality reviews in a devoted section of the Journal, entitled Quarterly Medical Review. These invited manuscripts will provide updated overviews of important themes in internal medicine. These chapters written by international recognized experts should be references for students, nurses, medical doctors and researchers wishing to have information on important medical themes. This month, we are truly delighted to present the first issue of Quarterly Medical Review focusing on Pulmonary involvement in systemic diseases. Authors from the United States, Ireland, Israel, Italy and France have prepared comprehensive manuscripts on critical aspects of the complex involvement of the respiratory system in major connective tissue diseases. Indeed, connective tissue diseases represent a heterogeneous group of inflammatory disorders with a large variety of affected organs including quite commonly the lungs [1]. The respiratory system may be involved in all its components (airways, vessels, parenchyma, pleura, respiratory muscles...) and some of these complications impact markedly the prognosis of these patients such as pulmonary arterial hypertension and pulmonary fibrosis in systemic sclerosis [1–9]. The frequency, clinical presentation, prognosis and response to therapy vary, depending on the pattern of involvement as well as on the underlying connective tissue disorders. Respiratory symptoms in a patient with a known connective tissue disease require a...
prompt and systematic work-up in order to diagnose specific complications, and not to miss frequent and nonspecific cardiorespiratory problems, such as pulmonary infections, pulmonary embolism, and heart failure. Conversely, every practitioner must have a high level of suspicion toward connective tissue diseases as these conditions can present initially as “idiopathic” pulmonary disorders. In the present issue, we have focused on the most frequent connective tissue diseases with chapters addressing scleroderma lung disease [10], pleural and pulmonary involvement in systemic lupus erythematosus [11], the lung in rheumatoid arthritis [12], the pulmonary manifestations of Sjögren’s syndrome [13] and pulmonary veno-occlusive disease in connective tissue diseases [14].

Conflict of interest: None.

References