



The lower respiratory tract: the hot spot for chronic fixed airflow limitation

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The small airways are key for the childhood events that shape into chronic fixed airflow limitation later in life <https://bit.ly/3OObdeW>

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Persistent airflow limitation in children and young adults is emerging as an umbrella term encompassing various biological and clinical manifestations occurring during the lifespan and starting before birth [1, 2]. The previous model of an accelerated decline of lung function, that would become manifest in adult life in susceptible individuals when chronically exposed to environmental noxious agents, such as cigarette smoke and other inhaled gases, has made way for a more comprehensive model where events occurring during the first years of life are key in predicting the trend of one's lung function during the lifespan [3–6]. Asthma and lower respiratory tract infections (LRIs) are major factors determining low lung function early in life, can persist into young adulthood and become fixed airflow limitation [7, 8]. However, to which extent, and what kind of, respiratory infections in early life are associated with the risk of wheezing or asthma in later life remains unknown.