1. **Noninvasive ventilation practice patterns for acute respiratory failure in Canadian tertiary care centres: A descriptive analysis.**
   Digby GC, Keenan SP, Parker CM, et al.

   **Editorial note:** While this is relevant for those of you mostly doing acute care, recognize the benefit that NIV does give for acute attacks of COPD. For those of you in the office, there is a stage between active treatment and intubation, and this includes NIV. For those of you doing a “living will” for someone not wanting to be intubated, consider whether they would like a trial of NIV prior to being fairly acutely palliative.

2. **Making a timely diagnosis of pulmonary tuberculosis.**
   Long R.

   **Editorial note:** Dr. Richard Long is a Canadian TB leader and his six easy steps to avoid missing TB are worth a look; the disease still exists in Canada!

3. **Empowering family physicians to impart proper inhaler teaching to patients with chronic obstructive pulmonary disease and asthma.**
   Leung J, Bhutani M, Leigh R, Pelletier D, Good C, Sin DD.

   **Editorial note:** It shows that family docs can make a huge difference in outcomes in obstructive airway disease by ensuring adequate inhaler device use. This is tough now, as there is a plethora of new devices to get to know.

4. **Obesity, low levels of physical activity and smoking present opportunities for primary care asthma interventions: an analysis of baseline data from The Asthma Tools Study**
   Yawn BP, Rank MA, Bertram SL, Wollan PC.

   **Editorial note:** Nice article from an American colleague of mine, showing that there are high-risk asthmatics we should worry about, with smoking and income levels obvious factors to consider. Obesity may be a separate phenotype and have some degree of steroid resistance.

5. **Understanding patient participation behaviour in studies of COPD support programmes such as pulmonary rehabilitation and self-management: a qualitative synthesis with application of theory.**
   Sohanpal R, Steed L, Mars T, Taylor SJ.
   *NPJ Prim Care Respir Med*. 2015 Sep 17;25:15054. doi: 10.1038/npjpcrm.2015.54.

   **Editorial note:** Patient adherence remains a mystery to many of us. This article looks at their adherence even to coming to see us!
6. **An Elevated Glycemic Gap is Associated With Adverse Outcomes in Diabetic Patients With Community-Acquired Pneumonia.**

**Editorial note:** Remember to treat patients’ comorbidities during acute respiratory exacerbations.

7. **Effectiveness of case finding strategies for COPD in primary care: a systematic review and meta-analysis.**

**Editorial note:** I am not sure what the magic formula is for finding those patients with COPD earlier in practice, but what is certain is if you do not look, you will not find them. The Canada Lung Health Test is as good as any assessment; smokers or ex-smokers with cough, sputum, wheeze, dyspnea, or frequent exacerbations should have spirometry done.

8. **CUR-65 Score for Community-Acquired Pneumonia Predicted Mortality Better Than CURB-65 Score in Low-Mortality Rate Settings.**

**Editorial note:** For those of you seeing a patient with pneumonia, the CURB-65 score is useful to help you decide who needs to be sent to hospital. Check it out!

9. **Weekend Discharges and Length of Stay Among Veterans Admitted for Chronic Obstructive Pulmonary Disease.**

**Editorial note:** In these times of cost-control measures, earlier discharge saves the health care system money. While it may be tempting to leave the discharge to the MRP on Monday, if the patient is ready to go home, send them, but ensure proper follow up, please!

10. **A new era of personalized medicine for cystic fibrosis - at last!**

**Editorial note:** We are continuing to learn more about cystic fibrosis, and there are more things to do to help these patients than ever before.

11. **Incidental findings on chest CT imaging are associated with increased COPD exacerbations and mortality.**
Jairam PM, van der Graaf Y, Lammers JW, Mali WP, de Jong PA; PROVIDI Study group.
Editorial note: Do not ignore incidental findings in imaging, including CT findings of emphysema, airway thickening, and bronchiectasis, as they predict bad outcomes, especially if ignored!


Editorial note: My wife tells me she does not use bleach very often anymore, for lots of reasons. Here is a medical one.