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Editorial **Published Date:- 2018-12-21**

Pneumothorax, pneumomediastinum, subcutaneous emphysema: serious complications of asthma

Bronchial asthma, is a quite common disease characterized by the chronic inflammation of the airways. It is due to the interaction of genetic with environmental factors. Currently, bronchial asthma is regarded as a public health problem, since its prevalence is constantly increasing worldwide. Common symptoms associated with asthma include repeated episodes of wheeze, dyspnoea, chest tightness and cough. Although commonly most asthmatic episodes are resolved with medical treatment, at times serious complications can deteriorate the clinical picture. Among these complications, the simultaneous spontaneous bilateral pneumothorax, the subcutaneous emphysema and the pneumomediastinum are life threatening complications.

Mini Review **Published Date:- 2018-12-19**

HIV-1 Immune evasion: The main obstacle toward a successful vaccine

It is estimated that there are 36.9 million individuals living with HIV-1 from who 21.7 million patients receiving antiretroviral therapy (ART) [1,2]. ART has had a significant effect on the patients' quality of life recently, however, its global coverage declines to 16-35% in low or middle income parts of Africa [3]. ART is unable to eliminate the virus from the infected individuals despite the fact of great impact on virus life cycle. There is no doubt that vaccination is considered as the most important medical strategy to prevent and suppress the infectious diseases. Nevertheless, there are many difficulties toward the cure or prevention of HIV-1 including the virus characteristics, lack of ideal animal model and funding [4-7].

Review Article **Published Date:- 2018-09-13**

Diagnosis of Asthma in Childhood Age

Background: Asthma is the most common chronic respiratory disorder in childhood. Asthmatic attacks are described and classified according to the type of wheezing to Non –atopic and Atopic asthma (IgE mediated wheezing). The aim of this review is to determine the onset of clinical diagnosis in relation to clinical presentation of asthma in children and obstacles related to delay of Asthma diagnosis.

Methods: This review highlights the results of studies done regarding clinical diagnosis in relation to clinical presentation and of asthma in children. An extensive search has been conducted for researches about asthma in children. This search based on the publications posted on the National Center for Biotechnology Information PubMed or by Google Scholar. Key words used for the research: Asthma, clinical diagnosis, children.

Results and Conclusion: Diagnosing asthma in young children is difficult because children often cough and wheeze with colds and chest infections, but this is not necessarily asthma. Miss diagnosis of asthma in children occurs when physicians diagnose patients with asthma from the clinical diagnosis in the first attack without excluding other asthma mimickers which can be any other respiratory problem. There is over-diagnosis of asthma due to the symptoms which mimic other respiratory infections. First episodes of cough, runny nose and fever that happen in cold/flu season- fall/winter/early spring is likely not asthma. If the child has several more episodes of wheeze and cough, it is likely to be asthma. Since there is no diagnostic test available for children younger than 6 years of age, making a diagnosis in this age group is more difficult than in older children. Over the age of about 6 years it is possible for a child to have a spirometer test

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Editorial **Published Date:- 2018-03-05**

[Interplay between asthma and gastroesophageal reflux disease: A controversial issue]

Gastroesophageal reflux disease (GERD) is a quite common disease caused by the reflux of gastric contents into the esophagus and manifested by heartburn and acid regurgitation. Apart from the esophageal manifestations, GERD is implicated in extraesophageal manifestations including pulmonary manifestations i.e. asthma, chronic cough, pneumonia, idiopathic pulmonary fibrosis, otolaryngological manifestations i.e. laryngitis, otitis, polyps, cancer of the larynx, chest pain [1,2]. The relationship between GERD and pulmonary manifestations is quite challenging and ongoing research efforts have focused on the elucidation of the pathogenesis of GERD induced asthma.

Research Article **Published Date:- 2018-02-23**

[Role of Serum Magnesium levels in Asthmatic with children]

Objective: To determine the association between serum magnesium level and asthma, by establishing the difference in serum magnesium level between children with asthma and controls.

Method: Serum magnesium levels of 44 children with acute asthma and 44 controls of the age group of 6-16 years was determined and statistically compared. Lung function tests (FEV1%) were done and correlated with serum magnesium levels using Pearson's comparison coefficient.

Results: The mean serum magnesium value of cases (1.9136±0.44) is lower than the controls (2.0042±0.26), with 32 cases showing a deficiency of serum magnesium. Pearson's correlation coefficient, reveals positive correlation between FEV1% with serum magnesium levels, r=0.819, P<0.001.

Conclusions: This study reveals that the serum magnesium levels, even if in normal range, are statistically lower amongst asthmatics. It also brings out the relationship between magnesium levels and lung function tests, showing an improvement in the latter with increase in the former.

Editorial **Published Date:- 2018-01-25**

[Chemo-cytokines network is main target for control of Allergic asthma]

Asthma is a chronic respiratory disease which characterized by recurrent airflow obstruction, wheezing, chest tightness and coughing. Management of allergic asthma especially in children, is main problem for industrial world. Immunological factors have critical role in pathogenesis of allergic asthma. Cytokines as major controller of immune system, are important in this reaction. Allergic asthma is a disease with symptoms: eosinophilic inflammation, mucus hyper secretion, airway obstruction, airways hyperresponsivness, IgE high level production, smooth muscle spasm. Cytokines have main and complicated role in pathophysiology of allergic asthma.
