appear higher with inhaled rather than IV corticosteroids, the studies by Lin et al and by Rodrigo and Rodrigo are not directly comparable, since only the first study evaluated steroids in second-line treatment.

I submit that, contrary to the view by Rodrigo and Rodrigo, the evidence favors the use of IV rather than inhaled corticosteroids in the supplementary treatment of patients with acute severe asthma in the emergency department.

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ECG Changes in Tension Pneumothorax

A Hypothesis

To the Editor:

We read with great interest the article by Strizik and Forman (June 1999) reporting ECG changes associated with a tension pneumothorax. The authors predicted that the PR-segment elevation was due to atrial ischemia. Usually, ECG changes associated with atrial ischemia may be absent or minimal because the voltage generated by thin-walled atria is low. PR-segment elevation in their case was quite high, and it does not seem appropriate to explain it as generated by thin-walled atria. The authors predicted that the PR-segment elevation from leads V1 to V4, which abruptly disappeared after the return to the baseline in the ST-T phase.

Moreover, continuous recording of lead II in Figure 2 (the lowest in the Figure) seems to show alteration of the PR-segment voltage according to the respiratory cycle. The sixth to the ninth beats are quite different from the others in the respect of diminished PR elevation and normalization of the ST-T depression. Altered intrathoracic pressure according to the respiratory cycle might have influenced the amplitude of cardiac shift in accordance with systole and diastole. Increased intrathoracic pressure during the inspiratory phase if the patient was on a respirator, or during the expiratory phase if the patient breathed spontaneously, restricted the downward shift of the heart, which resulted in the diminished PR elevation.

We have not encountered any reports or patients whose findings suggest the pendular motion of the heart in the air within the thoracic cavity as the etiology of the ECG baseline fluctuation in the period since we published our experience, and we believe the case presented by Strizik and Forman might be one of such cases.

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REFERENCES

Erratum

On the cover of the April 2000 issue, the Basic Science entry should have read:

Anti-inflammatory Cytokines

Opposite to these authors.

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