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Exertional dyspnoea–ventilation relationship to discriminate respiratory from cardiac impairment

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An upward inflection in dyspnoea versus both V'_E and WR exposes lung mechanical abnormalities. Conversely, sharp increases in dyspnoea as a function of WR but not V'_E suggest that the underlying mechanism is proportional to inspiratory neural drive. <http://bit.ly/2Ogapqr>

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To the Editor:

Activity-related dyspnoea is a key cause of physical impairment in cardiovascular and respiratory diseases [1]. Despite remarkable diagnostic advances in the past decades, discriminating “the heart” *versus* “the lungs” as a cause of exertional dyspnoea remains a challenge for cardiologists and pulmonologists.