The global significance of PRISm: how data from low- and middle-income countries link physiology to inflammation

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From the authors:

In a recent paper published in the *European Respiratory Journal*, we studied the characteristics, trajectory and mortality of subjects with Preserved Ratio Impaired Spirometry (PRISm) in the Rotterdam Study, a prospective population-based cohort study in the Netherlands, a high-income country (HIC) [1]. In an elegant letter to the editor, P. Jackson and T. Siddharthan correctly argue that clinical research on PRISm has been limited so far in its potential to grasp a representative sample of the world population, with marked underrepresentation of studies in low- and middle-income countries (LMICs). Despite potential differences in risk factors, they suggest that systemic inflammation plays a key role in the pathogenesis of PRISm in both HIC and LMICs. In the Rotterdam Study, we showed an increased white blood cell count in subjects with PRISm as compared to subjects with normal spirometry [1]. In addition, subjects with PRISm have higher serum levels of high-sensitive C-reactive protein, a higher granulocyte count, a higher granulocyte to lymphocyte ratio and a higher systemic immune inflammation index (table 1).