Correspondence

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Response to the letter to the editor: Organising pneumonia as a late abnormality in influenza A (H1N1) virus infection

The Editor,

We appreciate the letter to the editor from Dr Marchiori and colleagues, which was written in response to our work in "serial CT findings in patients with pneumonia in novel swine origin influenza A (H1N1) virus infection". We were particularly interested in their comments regarding organising pneumonia (OP) as a late abnormality in influenza A (H1N1) virus infection.

Among our 70 patients, only one patient was treated with a large number of corticosteroids. A few patients were treated with a small number of corticosteroids, and most were treated with antiviral and broad-spectrum antibiotics without corticosteroids. The signs of fibrosis (including parenchymal bands, irregular linear opacities, interfaces and traction bronchiectasis) in most of our patients were gradually regressed with time [1]. Other researchers also reported that pulmonary fibrosis in patients with H1N1 pneumonia was not a rare complication and could partially regress over time [2, 3]. A few of our patients with influenza A (H1N1) virus infection responded quickly to the corticosteroids. They might complicate organising pneumonia, but further work should be carried out to verify this. Recent clinical reports also suggested that there was no evidence of a beneficial effect of corticosteroids in patients with acute respiratory distress syndrome secondary to severe influenza A/H1N1 pneumonia, and very early corticosteroid therapy may be harmful [4]. The correlation between the findings of high-resolution CT (HRCT) and the effects of corticosteroid treatment will be the topic of our further study.

As we mentioned in our article, this study has several limitations. Despite the use of a standardised data collection form, not all clinical information was collected for all patients. Future work on the correlation between the findings of HRCT with symptoms and pulmonary function, and on the effect of drug treatment would

provide useful information for a better understanding of the disease and improvements in patient care.

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