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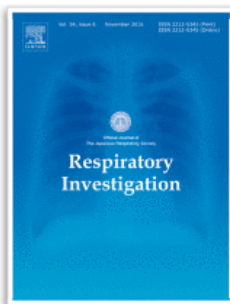
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Appreciation to Reviewers 2015

Appreciation to Reviewers 2015 Details

Many reviewers contributed their insights and advice to Respiratory Investigation in 2015, along with suggestions for improving manuscripts that were submitted for publication.

The Editors are grateful to all colleagues who have participated in this worthy endeavor. [Details](#)

[Appreciation to Reviewers 2014](#)

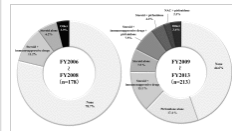
Current Issue

[November 2016](#)

Volume 54, Issue 6

Issue Highlights

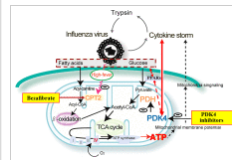
Reviews



[Pirfenidone: Clinical trials and clinical practice in patients with idiopathic pulmonary fibrosis](#)

Masashi Bando

Abstract: Pirfenidone is an oral drug that exerts not only anti-fibrotic activity but also pleiotropic effects, such as anti-inflammatory and anti-oxidative effects. Because it suppresses reduction in vital capacity and improves progression-free survival, it was approved in October 2008 in Japan for the first time in the world as an anti-fibrotic agent for treatment of idiopathic pulmonary fibrosis (IPF). In October 2014, the agent was approved in the U.S., based on the results of the ASCEND study. Today, it is commercially available in 38 countries worldwide.

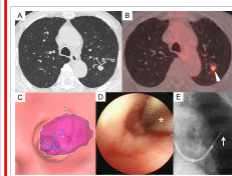


[Energy metabolic disorder is a major risk factor in severe influenza virus infection: Proposals for new therapeutic options based on animal model experiments](#)

Hirosi Kido

Abstract: Severe influenza is characterized by cytokine storm and multiorgan failure. Influenza patients with underlying diseases show a rapid progression in disease severity. The major mechanism that underlies multiorgan failure during the progressive stage of infection, particularly in patients with underlying risk factors, is mitochondrial energy crisis. The relationship between the factors that determine infection severity, such as influenza virus, cytokines, cellular trypsin as a hemagglutinin processing protease for viral multiplication, accumulation of metabolic intermediates and ATP crisis in mitochondria, is termed the "influenza virus-cytokine-trypsin" cycle. This occurs during the initial stages of infection, and is interconnected with the "metabolic disorders-cytokine" cycle in the middle to late phase of infection. Experiments using animal models have highlighted the complex relationship between these two cycles.

Original Article



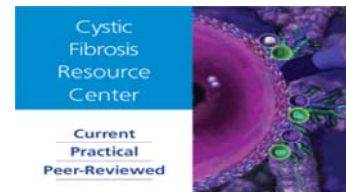
[Combination of virtual bronchoscopic navigation with conventional transbronchial needle aspiration in the diagnosis of peribronchial pulmonary lesions located in the middle third of the lungs](#)

Masanori Yasuo

Abstract: Endobronchial ultrasound-guided transbronchial needle aspiration (EBUS-TBNA) is frequently applied to the diagnosis of central airway lesions, and endobronchial ultrasound with a guide sheath (EBUS-GS) is mainly used for the diagnosis of peripheral pulmonary lesions. However, there remains an unmet need to improve the diagnostic yields for peribronchial pulmonary lesions located along the secondary/tertiary and fourth/fifth bronchi (the "middle third zone" of the lungs), which neither EBUS-TBNA nor EBUS-GS can easily approach.

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New Cystic Fibrosis Resource Center!



Clinical information on the management of patients with Cystic Fibrosis, including the latest information on new and emerging treatment options:

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- Patient/Caregiver Toolkit

Topic Series

Essential strategy for the better clinical trial of IPF

Review Articles

[Essential rules and requirements for global clinical trials in rare lung diseases: A sponsor's standpoint](#)

Thomas Kuerner

Abstract: International multicenter trials have the advent age of being able to recruit many patients within a short period. This is particularly useful for rare diseases. Ideally, conclusions drawn from the results of a global clinical trial apply to all study centers and countries involved, potentially expediting drug development and facilitating approval in foreign markets. However, several challenges must be overcome to ensure optimal trial conduct and coordinate trial sites working under different regulations and technical and cultural conditions. Thus, standardizing these trial elements is essential and may include training courses for the medical and technical staff at the study sites. Considering a rare disease, such as idiopathic pulmonary fibrosis (IPF), it is the trial sponsor's responsibility to seek consensus among clinical experts and regulatory agencies about fundamental questions, including a consistent diagnosis. . . .

Publishing Information

Respiratory Investigation is published by Elsevier for the The Japanese Respiratory Society.



Articles in Press Editorials

Two patients with TAFRO syndrome exhibiting strikingly similar anterior mediastinal lesions with predominantly fat attenuation on chest computed tomography

Yoko Ozawa, Hiroshi Yamamoto, Masanori Yasuo, Hidekazu Takahashi, Kazunari Tateishi, Atsuhito Ushiki, Satoshi Kawakami, Yasunari Fujinaga, Shiho Asaka, Kenji Sano, Hiroshi Takayama, Hiroshi Imamura, Masayuki Hanaoka
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Familial diffuse pulmonary ossification: A possible genetic disorder

Yoshiaki Kinoshita, Ichiko Mizuguchi, Kouko Hidaka, Hiroshi Ishii, Kentaro Watanabe
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Three-dimensional imaging forced oscillation technique to assess position-dependent airway obstruction in relapsing polychondritis: A case report

Takahiro Kamada, Isao Ito, Yoshihiro Kanemitsu, Susumu Sato, Hisako Matsumoto, Akio Niimi, Michiaki Mishima
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Giant bulla formation in the lung because of a check-valve mechanism

Aya Hirata, Takeshi Saraya, Nobuaki Arai, Shin Karita, Riken Kawachi, Hidefumi Takei, Kosuke Ohkuma, Manabu Ishida, Masachika Fujiwara, Hajime Takizawa
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Prognostic value of serial serum KL-6 measurements in patients with idiopathic pulmonary fibrosis

Kentaro Wakamatsu, Nobuhiko Nagata, Hiroyuki Kumazoe, Keishi Oda, Hiroshi Ishimoto, Michihiro Yoshimi, Shohei Takata, Minako Hamada, Yoshifusa Koreeda, Kouji Takakura, Miwa Ishizu, Makiko Hara, Shinji Ise, Miuru Izumi, Takashi Akasaki, Sanae Maki, Masaharu Kawabata, Hiroshi Mukae, Masayuki Kawasaki
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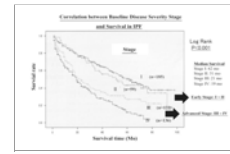


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The usefulness of a disease severity staging classification system for IPF in Japan: 20 years of experience from empirical evidence to randomized control trial enrollment
Sakae Homma, Keishi Sugino, Susumu Sakamoto



Abstract: Since 1991, the severity of idiopathic pulmonary fibrosis (IPF) has been classified into 4 stages

—stage I (characterized by a resting PaO₂ ≥ 80 Torr), stage II (70–79 Torr), stage III (60–69 Torr), or stage IV (<60 Torr)—to aid decisions on medical care subsidization in Japan. Among patients with stage II/III IPF, the severity should be increased by one stage if the lowest oxygen saturation on pulse oximetry (SpO₂) is <90% during a 6-min walk test. Patients with stage III/IV IPF receive Japanese government subsidies for incurable diseases. This classification system highly correlates with serial changes in the percentage of vital capacity (%VC), the diffusing capacity for carbon monoxide, the incidence of acute exacerbation, and survival. . . .

Consensus statement for the diagnosis and treatment of drug-induced lung injuries

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Keishi Kubo, Arata Azuma, Minoru Kanazawa, Hideto Kameda, et al.

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About *Respiratory Investigation*

Respiratory Investigation is the official journal in [The Japanese Respiratory Society](#). It reports significant original manuscripts on clinical investigations of respiratory diseases and medicines, along with articles concerning basic lung cellular and molecular biology and respiratory mechanics. In particular, to better understand the regional characteristics of respiratory disorders, investigations based on current knowledge of genomic specificity of the East Asian ethnics are welcome. The journal presents current accomplishments in this field as Original Articles, Case Reports, Reviews and Guidelines, Editorials, and Letters to the Editor. The journal accepts contributions from nonmembers of the Society. Please prepare manuscripts in conformance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (http://www.icmje.org/urm_main.html).

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