

Exercise-induced Dyspnea

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Abstract

The evaluation of exercise-induced dyspnea (EID) in otherwise healthy children and adolescents is often limited to a specific cause such as exercise-induced asthma or vocal cord dysfunction. However, modest degrees of bronchospasm or vocal cord dysfunction may occur in the absence of dyspnea. Testing that does not include concurrence of dyspnea with an abnormality may provide misleading information to the detriment of the patient. This commentary describes the limitations of two recent publications in Pediatric Pulmonology. Reproducing the patient's dyspnea during cardiopulmonary monitoring provides the etiology of at least 7 causes of EID.

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