Foreword

Harly Greenberg
Dr Harly Greenberg is Chief of the Division of Pulmonary, Critical Care and Sleep Medicine, at Northwell Health in New York and Associate Director of the Northwell Lung Institute. He is also Medical Director of the Northwell Sleep Disorders Center and Program Director for the Zucker School of Medicine Sleep Medicine Fellowship at Northwell Health. He is Professor of Medicine at the Zucker School of Medicine at Hofstra-Northwell. Dr Greenberg is a recognized expert in sleep medicine and has helped to advance the field as an investigator in multiple clinical research trials. His research has contributed to our understanding of the cardiovascular consequences of obstructive sleep apnoea. In addition, his work has also contributed to the development of new therapies for sleep apnoea and other sleep disorders. The Northwell sleep medicine fellowship programme which he directs has trained many fellows over the past two decades.

It is my great pleasure to introduce *touchREVIEWS in Respiratory & Pulmonary Diseases*, Volume 10, Issue 1, 2025. This issue brings together a collection of timely and thought-provoking articles addressing key challenges and emerging innovations across the spectrum of respiratory and pulmonary care. The topics covered reflect the dynamic nature of our field, from cutting-edge digital health technologies to long-standing clinical challenges in the management of pulmonary hypertension and lung cancer.

The issue begins with a compelling review by Amy Chan et al., who explore the role of smart inhalers in personalized asthma management. This article highlights how digital inhaler technology can provide valuable insights into adherence and inhaler technique, as well as opportunities for real-time feedback to support self-management. While the potential of these devices is clear, Chan also outlines the barriers to widespread clinical implementation, including data governance, identifying patients most likely to benefit and the need for robust evidence in real-world settings.

Next, Emma Chaplin and Linzy Houchen-Wolloff address the pressing issue of accessibility to pulmonary rehabilitation, a cornerstone of care for many patients with chronic respiratory disease. They examine how digital technologies are creating alternative models to overcome barriers to attendance and completion of pulmonary rehabilitation programmes, particularly among younger populations diagnosed earlier in life. Although promising, these approaches also raise questions regarding efficacy and equity of access, which remain important areas for future research.

The third article, by Bisharah S. Rizvi et al., presents a retrospective analysis of hospitalizations related to idiopathic pulmonary arterial hypertension (IPAH), comparing national data from the USA from 2007 and 2017. Encouragingly, the findings reveal a reduction in IPAH-related hospitalizations and all-cause mortality over the decade, reflecting progress in disease management and care delivery. However, the rising financial costs of care highlight the ongoing need for cost-effective treatment strategies and health system planning.

Gabriel Lenz et al. then turn our attention to the role of body composition, particularly muscle mass, in lung cancer outcomes. This review underscores the importance of preserving muscle mass during cancer treatment, as greater reserves are associated with improved tolerance of therapy, prolonged survival and enhanced quality of life. Lenz highlights the potential of bioelectrical impedance analysis as an affordable and accessible tool to inform more personalized treatment approaches.

Finally, Emmanuel Uchechukwu Ukenenye et al. examine racial and sex disparities in the incidence and survival of lung cancer among adolescents and young adults, using data from over 5,000 patients across two decades. While the overall incidence of lung cancer declined, the study reveals persistent disparities, with non-Hispanic Black men experiencing the lowest survival rates. These findings emphasize the need to address the socioeconomic and systemic factors that contribute to unequal outcomes.

Collectively, the articles in this issue reflect both the progress made and the challenges that remain in respiratory and pulmonary medicine. From digital innovations that empower patients to demographic studies that highlight inequities, this issue provides valuable insights for clinicians, researchers, and policymakers alike. It is my hope that these contributions will inspire further research, collaboration, and innovation aimed at improving patient care and outcomes worldwide. ❑