Lung ultrasound in bronchiolitis

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To the editor:

I read with interest the article from Caiulo and colleagues [2].

Since Lichtenstein described new applications of chest sonography in adults [3], some authors have published on its application in children, and this topic has become very popular given the absence of radiation. The article by Caiulo et al. focused on bronchiolitis, defined as infection of the small airways and whose radiologic clues are hyperinflation and peripheral atelectasis [1].

It is therefore surprising that, in their study, hyperinflation was evident in only 1/52 infants with bronchiolitis.

Concerning the ultrasound (US) pattern, we are doubtful about the real meaning of small subpleural lung consolidations and pleural line abnormalities. US cannot reliably differentiate pneumonia from atelectasis, which is—on the other hand—often associated with severe pneumonia [5]. Furthermore, according to the experience derived from chest CT in early childhood, these aspects can be related also to incomplete expansion of the alveoli [4], which are often

incidentally observed in healthy lungs investigated for other reasons.

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