

Foreword

From “Samter’s Triad” to “NERD”: The Long and Winding Road to Understanding Aspirin-Exacerbated Respiratory Disease



Stephen A. Tilles, MD
Consulting Editor

Depending on where you trained, you may have learned about “Samter’s triad,” “triad asthma,” “ASA-induced asthma with nasal polyposis,” “aspirin-exacerbated respiratory disease” (AERD), or even “NSAID-Exacerbated Respiratory Disease.” Each of these names represents an attempt to categorize the same group of our most challenging patients, and this well-meaning but confusing nomenclature reflects the inherent difficulty encountered when trying to bridge the gap between clinical descriptions and a true understanding of this unique syndrome. We have known for decades that patients with this condition are no more likely to be atopic than the general population, suggesting early on that pathways to eosinophilic inflammation exist that are not dependent on IgE recognition of an allergen. Fortunately, in recent years there has been significant progress made in describing the pathophysiology of AERD. This issue of *Immunology and Allergy Clinics of North America* provides detailed reviews of our current understanding of the AERD endotype, including the roles of mast cells, eosinophils, and lipid mediators, as well as an updated description of how cyclo-oxygenase inhibition results in such an explosive onset of clinical symptoms. In addition, there are three separate articles on aspirin therapy. The first article summarizes its mechanisms; the second reviews clinical trial data, and the third details safe and effective approaches to achieve clinical benefit.

The group of authors assembled by guest editor, Andrew White, for this issue of *Immunology and Allergy Clinics of North America* includes both “giants” in the field

who have conducted active investigation and systematic clinical AERD care their entire careers as well as early and mid-career AERD experts who provide complementary insights. I think you will agree that this collection of articles will serve as an essential reference for both trainees and practicing specialists who take care of AERD patients, including Allergy/Asthma specialists, Pulmonologists, and Otolaryngologists.

Stephen A. Tilles, MD
ASTHMA Inc Clinical Research Center
Northwest Asthma and Allergy Center
University of Washington
9725 Third Avenue, NE, Suite 500
Seattle, WA 98115, USA

E-mail address:
stilles@nwasthma.com