Reply: Intrapulmonary shunt and alveolar dead space in a cohort of patients with acute COVID-19 pneumonitis and early recovery

Piotr Harbut[1], G. Kim Prisk[2], Robert Lindwall[1], Sarah Hamzei[1], Jenny Palmgren[1], Catherine E. Farrow[3,4,5], Goran Hedenstierna[6,†], Terence C. Amis[3,4,5], Atul Malhotra[2], Peter D. Wagner[2] and Kristina Kairaitis[3,4,5]

[1]Karolinska Institutet, Danderyd Hospital, Stockholm, Sweden. [2]University of California, San Diego, CA, USA. [3]Ludwig Engel Centre for Respiratory Research, Westmead Institute for Medical Research, Sydney, Australia. [4]Department of Respiratory and Sleep Medicine, Westmead Hospital, Sydney, Australia. [5]Sydney Medical School, Faculty of Medicine and Health, University of Sydney, Sydney, Australia. [6]University of Uppsala, Uppsala, Sweden. [†]Deceased.

Corresponding author: Kristina Kairaitis (kristina.kairaitis@sydney.edu.au)

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Reply to M. Ackermann and co-workers:

We thank M. Ackermann and co-workers for their interest in our recent publication [1]. These authors highlight our report of persistent increased alveolar dead space in 30% of 17 patients studied within ~2 months after an acute episode of mild–moderate COVID-19. After outlining their own work, demonstrating secondary pulmonary lobule pathologies found in the lungs of deceased COVID-19 patients, they then hypothesise that secondary lobular micro-ischaemia may be responsible for the elevated alveolar dead space found in our study.