January 18, 2019

Gary Gibbons, MD
Director, National Heart, Lung, and Blood Institute
Building 31, 9000 Rockville Pike, Room 5A48,
Bethesda, MD 20892-2082

Dear Dr. Gibbons:

On behalf of the leading lung health and medical organizations, we write in strong support of a new epidemiologic cohort study submitted by a team of accomplished researchers in partnership with the American Lung Association's Airways Clinical Research Centers (ACRC) entitled "The American Lung Association Lung Health Cohort" (U01 HL146408-01).

It is the belief of the undersigned organizations on behalf of the lung health community that this study, which seeks to define and promote lung health, will develop targets to intercept and prevent chronic lung disease, and will also engage the broader scientific community in a population-based effort to understand all forms of respiratory disease. This is a pivotal step forward for the lung community. This first US-based epidemiologic cohort focused on respiratory health will recruit 4,000 young adult participants across 17 centers nationwide. It will fill a critical gap in the portfolio of studies that have been funded by the National Heart Lung and Blood Institute, enabling researchers to determine whether modifiable risk factors such as air pollution exposure, and inhalation exposures such as marijuana and e-cigarettes are associated with lower lung function and respiratory symptom burden. These findings can be used by the lung health community in both primary prevention and clinical care.

The cardiovascular community has implemented data from large-scale epidemiologic studies (such as Framingham, CARDIA, ARIC, MESA, and the Jackson Heart Study among others) to define cardiovascular health across the lifespan, inform public health policy and integrate prevention into clinical care. The respiratory community requires a similar undertaking to develop a platform of a lung health focused epidemiologic study to replicate this progress in respiratory diseases.

The findings of the American Lung Association Lung Health Cohort will have long term impact and provide targets for the interception of chronic lung disease at its earliest stages while also defining factors associated with ideal respiratory health. We are all eager partners in the aggregation and dissemination of the communal knowledge that will be gained through the American Lung Association Lung Health Cohort: This will be the entire lung community's study and will add immeasurably to our understanding of the development of lung diseases.

The lung health community supports this study, because we lack the "cholesterol for the lung," and improved respiratory health outcomes require life-course epidemiologic studies such as the Lung Health Cohort to find markers of susceptibility to future lung diseases that can be translated to clinical care. The connection between this study and the respiratory community's research, advocacy, and educational efforts will make this work both highly impactful and lead to long-term improvements in the nation's health.

We hope the NHLBI shares our enthusiasm for this study and the vision we all share for understanding the development of lung diseases and improving respiratory health across the population.

Sincerely,
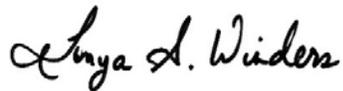
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