


The Relationship Between Personal Factors, Smoke Exposure at Home, and Respiratory Problems in Early Childhood in Nakhon Si Thammarat Province, Thailand [Letter]

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Dear editor

We have read the research article “The Relationship Between Personal Factors, Smoke Exposure at Home, and Respiratory Problems in Early Childhood in Nakhon Si Thammarat Province, Thailand” by Phetruang et al.¹ We want to congratulate the authors on this successful article and make some contributions. This research has four strengths: 1) it highlights the negative impact of smoke exposure on children’s respiratory health. This emphasizes the need for family members to avoid smoking at home to reduce the severity and extent of respiratory problems in early childhood. 2) identify personal factors such as birth weight, breastfeeding, and nutritional status that can influence respiratory problems in early childhood. This can help healthcare professionals develop targeted interventions to mitigate these risks. 3) the findings of this study can provide input for public health policies and interventions aimed at reducing exposure to cigarette smoke at home and improving children’s respiratory health. 4) researchers engaged with the community, including health-promoting hospital directors, village chief executives, health volunteers, parents, and research participants, to clarify the details and goals of the project. This encourages community involvement in research and ensures that the research is relevant and beneficial to society.

However, we identified two limitations of this study that can be addressed in future research: 1) this study identified personal factors such as birth weight, breastfeeding, and nutritional status that may influence respiratory problems in early childhood. Future research could consider factors that influence respiratory problems in early childhood: a) respiratory infections (such as those caused by viruses or bacteria) are common in early childhood and can lead to bronchitis or pneumonia.² b) premature birth: Babies born prematurely have underdeveloped lungs, making them more susceptible to respiratory problems.³ c) genetics, a family history of respiratory diseases (such as asthma or allergies) can increase the child’s likelihood of experiencing respiratory problems.⁴ d) allergies and allergic reactions to substances (such as pollen, pet dander, or certain foods) can trigger respiratory symptoms in susceptible children.⁵ e) immunization status, lack of appropriate immunization can make children more susceptible to preventable respiratory tract infections.^{6,7} e) exposure to irritants and contact with respiratory irritants, such as solid chemicals or indoor pollutants, can cause respiratory problems.^{8,9} 2) there is a significant relationship between exposure to cigarette smoke at home and respiratory problems in children. However, the researchers did not explain the duration of exposure and the number of cigarettes smoked per day. Future research may take this into account because people exposed to secondhand smoke over long periods and in large amounts are at higher risk of developing respiratory health problems.¹⁰

In conclusion, research, accompanied by a thorough explanation of its methods and findings, is essential in advancing healthcare practice and improving patient outcomes.

Disclosure

The authors report no conflicts of interest in this communication.

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