## Introduction to JTD Cough Section

Cough is among the most common complaints for which patients worldwide seek medical attention (1). Acute cough, defined as cough of less than 3 weeks' duration, is often transient and self-limited, although it may cause significant morbidity (2). Chronic cough (>8 weeks duration) often responds to targeted therapy once the underlying cause is defined but, unfortunately, a significant subgroup of such patients proves refractory to thorough and appropriate management protocols (3). Indeed, the challenge presented by patients with chronic cough has led numerous respiratory societies to publish cough evaluation and management guidelines to aid clinicians in treating this difficult and complex patient population (4).

Fortunately, the last decade has witnessed a significant increase in clinical and basic science research in the field of cough, driven by a heightened awareness of the tremendous clinical and economic impact of this common condition, and aided by the development of instruments to measure cough-specific objective and subjective end points in clinical trials (5). Indeed, the recent availability of ambulatory cough monitors and validated subjective cough symptom questionnaires has allowed the execution of high-quality research studies evaluating potential antitussive agents (6).

The convergence of increased appreciation of the importance of cough and rapidly escalating scientific interest in the etiology and therapy of cough has motivated the *Journal of Thoracic Disease (JTD)* to actively embrace this emerging and exciting field of inquiry. To that end, the journal is initiating a dedicated Cough Section. The goal of the Cough Section is to serve as an efficient vehicle through which clinicians and scientists can publish their cough-related work. The Cough Section will feature original investigations as well as review articles, opinion pieces, and selected case series and reports. We invite authors to submit their contributions to the new Cough Section of the *JTD*.

## References

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