hours of exercise per week than the control subjects, which might explain their lower level of physical fitness. Diminished exercise capacity did not seem to be a result of impaired lung function or limited ventilation. We might want to encourage all children who were born prematurely to participate in more physical activity and sports at an early age, because this might possibly improve the exercise performance of those in this group.

**RESULTS.** Of the 84 subjects reevaluated, 40 (48%) had evidence of postinoculation RSV infection. Eleven (5 atopic, 6 nonatopic) had evidence of postinoculation RSV infection. Atopic patients had a higher IgE level at baseline as compared to nonatopic patients.

**CONCLUSIONS.** Many adults with a history of moderate-to-severe allergic asthma in childhood have irreversible lung-function deficits. Childhood parameters that might identify such individuals at a young age include spirometry, duration of asthma, methacholine sensitivity, and birth prematurity.

**METHODS.** Subjects without concurrent upper or lower airway disease were cloistered and inoculated with 10⁶ plaque-forming units of RSV type B. Daily physical examination and symptom scores were recorded. Nasal lavages were performed and stored at −70°C for RSV-antigen assay and culture. Blood samples were obtained for immunoglobulin E (IgE) measurement on days 0, 2, 4, 6, 8, 10, and 21. Skin-prick testing was performed for 17 locally relevant aeroallergens and controls on days 0, 3, 6, and 21.

**RESULTS.** Eight patients had ≥1 positive skin-test result at baseline and were considered atopic. Eleven (5 atopic, 6 nonatopic) had evidence of postinoculation RSV infection. Atopic patients had a higher IgE level at baseline as compared to nonatopic patients.
Allergy Skin Test Responses During Experimental Infection With Respiratory Syncytial Virus
Mitchell R. Lester
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