

<b>Refid</b>	<b>Author(s)</b>
44	Ojanguren I, Cruz MJ, Villar A, Barrecheguren M, Morell F, Muñoz X
45	Guerrero Zúñiga S, Sánchez Hernández J, Mateos Toledo H, Mejía Ávila M, Gochicoa-Rangel L, Miguel Reyes JL, Selman M, Torre-Bouscoulet L
46	Lee JS, Shin JH, Lee JO, Lee KM, Kim JH, Choi BS
47	Vlaanderen J, Pronk A, Rothman N, Hildesheim A, Silverman D, Hosgood DH, Spaan S, Kuijpers E, Godderis L, Hoet P, Lan Q, Vermeulen R
48	Sandrini A, Johnson AR, Thomas PS, Yates DH
49	Radauceanu A, Grzebyk M, Edmé JL, Chérot-Kornobis N, Rousset D, Dziurla M, De Broucker V, Hédelin G, Sobaszek A, Hulo S

Title	Year of Publication
Utility of Exhaled Nitric Oxide Fraction for the Diagnosis of Hypersensitivity Pneumonitis	2016
Small airway dysfunction in chronic hypersensitivity pneumonitis	2017
Levels of Exhaled Breath Condensate pH and Fractional Exhaled Nitric Oxide in Retired Coal Miners	2010
A cross-sectional study of changes in markers of immunological effects and lung health due to exposure to multi-walled carbon nanotubes	2017
Fractional exhaled nitric oxide concentration is increased in asbestosis and pleural plaques.	2006
Effects of occupational exposure to poorly soluble forms of beryllium on biomarkers of pulmonary response in exhaled breath of workers in machining industries	2016

<b>journal</b>	<b>Exposure/Occupation</b>	<b>Type of study</b>
Lung	SIC for diagnosis of HP	Cross sectional
Respirology	Expert assesment for diagnosis	Cross sectional
Toxicol Res	Retaired coal miners	Case-control
Nanotoxicology	Carbon nanotubes	Case control
Respirology	Asbestos	Case control
Toxicol Lett	Berilium	Case control

Comparator	Sample Size
HP patients/ILD patients	25: 11 HP/ 14 other ILD; 11 men/14 women
None	20
Pneumoconiosis/ retired coal miners without radiological image of pneumoconiosis	120
Workers exposed to different levels: low/intermediate/ high vs. age and gender matched controls	61: 22 exposed (9/6/7)/39 controls
Patients vs healthy controls	91: 56 asbestos related diseases/ 35 controls
Workers exposed vs. controls from the same plant, never exposed directly to berilium	46: 20 exposed/ 16 controls

<b>Confounders</b>
Treatment (corticoid exclusion criteria)
Smoking, allergies, previous medical conditions
Recent upper respiratory tract infection, sinusitis, asthma, active or passive smoking, alcohol, medication
Smoking, age, exposure

## Findings

1. No differences in FeNO were found before and after the SIC test.
2. No differences in baseline FeNO in patients diagnosed with HP vs other ILD.

FeNO measurements do not appear to have clinical utility for diagnosis or follow-up in chronic HP

FeNO did not show statistically significant difference between pneumoconiosis and controls and between stages of pneumoconiosis II or III (ILO categories)

Significantly lower FeNO in the highest exposure group ( $p=0.01$ ), particularly in non-smoking ( $p=0.008$ ).

Median FeNO was significantly increased in subjects with asbestosis and pleural plaques compared with normal controls.

FeNO levels were not significantly related to indices of beryllium exposure