



On Lithoptysis and the Limitations of Bibliographic Databases

To the Editor: An interesting article by García Pachón et al¹ describing a case of chronic idiopathic lithoptysis was recently published in your journal. Lithoptysis is a rare clinical process, as evidenced by the fact that neither *lithoptysis* (lithoptysis) nor *broncolito* (broncholith)—a related and perhaps better known term—is even included in the latest edition of the Spanish version of *Dorland's Illustrated Medical Dictionary*.² Similarly, no specific MeSH³ descriptor for lithoptysis exists in the MEDLINE database; the term can only be found by performing a general search. As a result of these limitations, García Pachón and colleagues assert in their article that only 1 case of lithoptysis has been reported in Spanish medical journals. However, we in fact reported a case in this same journal, in 1992.⁴ We described the case of a silica and tungsten miner who had a previous history of tuberculosis and whose broncholiths consisted mostly of hydroxyapatite with small amounts of calcium carbonate and trace amounts of iron, copper, and zinc; curiously, no silica or tungsten—the minerals to which the miner had been exposed—was found.

Until very recently, it was not unusual to discover that a review article on rare diseases had overlooked some information. Fortunately, however, comprehensive databases are becoming increasingly accessible, making it possible to search for case reports published in English or Spanish. In addition to the Spanish Medical Index (IME, Índice Médico Español), the other Spanish medical database that should be searched is the Spanish Health Sciences Bibliographic Index (Índice Bibliográfico Español en Ciencias de la Salud; <http://bvs.isciii.es/E/index.php>), although there is considerable overlap between the 2 databases. Nevertheless, it is not possible to guarantee a comprehensive search of Spanish medical journals.⁵ ARCHIVOS DE BRONCONEUMOLOGÍA, for example, has only been indexed in MEDLINE since 1994, after our article was published. Nor can our article be found in the IME (<http://bddoc.csic.es:8080/index.jsp>), a fact that once again confirms the shortcomings of this database.⁶

Given these deficiencies, editorial policy should require that articles describing rare cases provide information on the databases searched and terms used to show that bibliographic sources have been adequately reviewed.

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