

Thanks so much for being a part of the CHIME Study! This is the first in a series of newsletters that will update you about the progress of the study and provide some background on different aspects of the study.

IN DEPTH: VITAMIN D



Vitamin D is a nutrient that our bodies need to build and maintain our bones. There is increasing evidence that vitamin D may also be important for other parts of our bodies, not just bones. We get some vitamin D from the foods that we eat (such as fish and vitamin D-fortified foods like cow's milk), but compared to other vitamins, such as vitamin A (green leafy vegetables) and vitamin C (fruit), we don't get very much vitamin D from our diets. The most important source of vitamin D is exposure to sunlight. Sunlight causes a chemical reaction in our skin that helps make vitamin D. However, excessive exposure to sunlight also can damage skin and may later cause skin cancer. Why do we care about vitamin D for the CHIME Study? Our team has previously found evidence that low levels of vitamin D might be related to children's respiratory health. It's too early to draw firm conclusions, but with your help we hope to get some answers in the CHIME Study!

IN DEPTH: NASAL SWABS

Have you wondered why we collect nasal swabs from your child? And what is that liquid we put the swab in, anyway? The reason we take nasal swabs during CHIME Study research visits is so that we can use them to study the bacteria, or "microbiome," living in the nose of healthy children. You may have noticed that, after we take the nasal swab, we drop it into a tube with liquid in it. We use the liquid to keep the bacteria intact until they get to the lab for testing. We also freeze the sample right away to help preserve it. At the lab, we later test your child's sample in a batch with other samples to find out which bacteria are living in your child's nose. We hope that this information has helped you understand why we take nasal swabs and what happens to them after we collect them!

CONTACT US!

Do you have any questions about the CHIME Study? Did you recently move, or change your phone number or e-mail? Please let us know so we can stay in touch. Call or e-mail us anytime!



GET TO KNOW: DR. CARLOS CAMARGO



Carlos Camargo is the lead investigator of the CHIME Study. He is based at Massachusetts General Hospital in Boston, where he works as the director of the Emergency Medicine Network (EMNet), an international research group. The EMNet Coordinating Center is based in Boston, and manages many research studies related to public health, including the CHIME Study. Dr. Camargo's research focuses on respiratory and allergy problems, which is why we are so interested in the microbiome living in the nose and intestine of healthy children. However, Dr. Camargo also works on many different health projects around the world – from Chile to Mongolia to New Zealand.

Dr. Camargo lives in Boston with his wife and two daughters. He speaks several languages and likes to travel. A highlight was climbing Mt. Kilimanjaro with his daughters – almost 20,000 feet!

"The CHIME Study will provide critical information on the microbiome living in the nose and intestine of healthy children.

This information will help us better understand how we can prevent conditions like food allergy and asthma."



CHIME PROGRESS: LOOKING BACK AND LOOKING FORWARD

As a reminder, the CHIME Study is a national study on the normal bacteria, or "microbiome," living in the nose and intestine of healthy children and the impact of the microbiome on childhood health. Variations in the microbiome have been linked to different childhood diseases, but we do not fully understand what can be done to create a healthier microbiome. The CHIME Study is investigating these important issues. Your participation, and the information you and your child provide, will play a vital role in improving our understanding of the microbiome and its relationship to childhood health.

The CHIME Study has **720** participants, who were enrolled as infants in clinics in Boston (MA), Louisville (KY), Philadelphia (PA), and Phoenix (AZ). Most of the children (600 of the 720) are now about **1** year old, but 120 children are around **4** years old. The older group was enrolled in Boston a few years ago, and they provided key information that helped prepare us to expand the study to the current number of 720.

At present, we are focusing on the age 1-year in-person visits for the younger group. At this point, over 400 children have completed this age 1-year in-person visit! Thank you!

Whatever your child's age, the Coordinating Center staff will be calling you to learn more about your child's health. These calls typically take about 5 to 15 minutes. We look forward to talking with you!

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