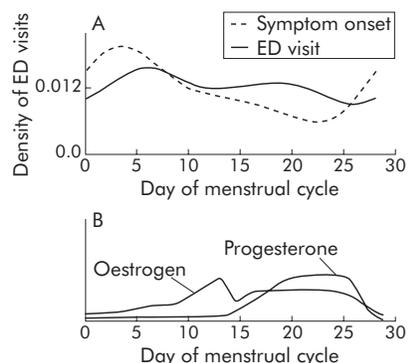


MENSTRUAL CYCLES, HORMONES AND ASTHMA

Women of reproductive age are more likely to be admitted to hospital for asthma than men, as pointed out by Forbes in his editorial which comments on two papers in this month's *Thorax* on the association between asthma and female sex hormones. This observation has precipitated research on the link between asthma and the female sex hormone cycle, but the results of studies have been inconsistent. In this issue we publish two papers on this topic. Brenner and colleagues explore the relation between the phase of the menstrual cycle and presentations with acute asthma to the emergency department. In contrast to previous suggestions, they found no relation between asthma exacerbations and the perimenstrual phase. They conclude that both preovulatory and perimenstrual phases act as co-factors, worsening other triggers of acute asthma. As maternal sex hormones can theoretically influence the developing fetal immune system, Maitra and colleagues studied the association between early onset menarche in pregnant women and asthma and atopic status of their children when aged 7. They found no



Emergency department (ED) visits for asthma. (A) Timing of ED visit for acute asthma in relation to blood hormone levels in idealised menstrual cycle (B).

consistent relationships between maternal age of menarche, asthma and atopic disease in their children during early childhood. Forbes ends with a comment about a paper by Svanes *et al* published in the June 2005 issue of *Thorax*, which suggests that asthma and allergy may share a common aetiology with the metabolic syndrome and insulin resistance. This subject will keep researchers busy for some time to come.

See pages 445, 793, 806 and 810

PASSIVE SMOKING AND ASTHMA

As Britton points out in his editorial, active smoking accounts for 100 000 deaths in the UK each year and passive smoking accounts for at least 12 000 deaths annually in the UK. In this issue of *Thorax* we report a study by Eisner and colleagues on the relationship between second hand smoke exposure and asthma using direct measurement of passive smoke exposure with a personal nicotine badge and hair nicotine and cotinine analysis. The authors found that passive smoking was associated with poorer asthma outcomes. Britton concludes that passive smoke exposure is likely to be bad for all asthmatics, who are advised to avoid exposure as, indeed, should everyone else.

See pages 794 and 814

RISKS OF BUPROPION

The use of bupropion has fallen in the UK in the last few years after newspaper reports that it caused sudden death. In this month's *Thorax*, Hubbard and colleagues report data from a computerised general practice database (The Health Improvement Network) on bupropion prescriptions in 9329 individuals, making this the largest study of first time users of bupropion to date. The study found that there is probably an increased risk of seizures associated with bupropion use, but there was no evidence of any increased risk of sudden death and, indeed, the mortality rate while using bupropion was lower than expected. The authors suggest that this may be because bupropion is prescribed during a period when patients are well.

See page 848

EPITHELIAL-MESENCHYMAL TRANSITION

Obliterative bronchiolitis is an important cause of morbidity and mortality after lung transplantation and is characterised by airway epithelial damage and fibrosis. The development of the fibrotic process is not well understood, but it has been suggested that epithelial cells can become fibroblasts through a process termed epithelial-mesenchymal transition (EMT). In an interesting paper, Ward and colleagues show evidence of phenotypic and functional markers of EMT in both in vivo biopsy specimens and ex vivo primary cell cultures from lung allograft recipients. This is the first time this feature has been described in the human airway and supports the hypothesis that fibroblasts may originate directly from airway epithelial cells.

See page 865

SUGGEST REVIEWERS FOR YOUR PAPERS

Online manuscript submission systems include the ability for journal authors to suggest reviewers for their papers. However, the benefits of suggesting reviewers for the peer review process are not known. In this issue we publish a short study of reviewer selection in *Thorax*. Just over half the authors suggested reviewers, and these author suggested reviewers generally returned a more favourable response and one that was mainly in agreement with the final decision. We are encouraging all our authors to suggest reviewers during the manuscript submission process.

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