This week in BMJ

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Smoking and occupational allergy

Why do some people develop asthma, hay fever, or related allergic conditions but others do not? Differences in genetic background or in allergen exposure provide some answers, but another factor may be exposure to adjuvants which increase susceptibility to allergy mediated by IgE. Smoking, which has an adjuvant effect on the production of IgE in animals, now seems to have a similar effect in humans in an occupation at high risk of asthma and other allergic conditions. On p 939 Venables et al describe a longitudinal study of a cohort of workers in a platinum refinery, which found that smokers had a substantial fourfold to fivefold increased risk of developing a positive reaction to platinum salts on skin prick testing and confirmed the findings of several earlier cross sectional studies.

Captopril and veins

Captopril is thought to work by dilating arteries. On p 942 Capewell *et al* show that captopril is also a potent dilator of peripheral veins in patients with heart failure, producing more venodilatation than glyceryl trinitrate. This may partially explain "first dose" hypotension, which sometimes occurs when angiotensin converting enzyme inhibitors are introduced.

Venodilatation persisted after long term captopril treatment, which may explain why postural hypotension sometimes occurs. It also raises an interesting question about prolonging survival in heart failure. This has been achieved only with two regimens, enalapril and the combination of hydralazine and isosorbide dinitrate. It may be no coincidence that both are probably venodilators.

Breast feeding and lower respiratory tract illnesses in infants

Although breast feeding seems to protect against illnesses of the lower respiratory tract in developing countries, the evidence in industrialised countries has been more mixed. In a large prospective study conducted in the United States Wright et al (p 946) found that the rate of wheezing illnesses in the first four months of life was significantly higher for children who were breast fed for less than one month or not at all. Furthermore, if these children were also exposed to other risk factors for lower respiratory tract illness such as sharing a room their rates were even higher. These results suggest that relations between breast feeding and respiratory illness may be found in industrialised countries when researchers look at children who are exposed to risks comparable with those for children in developing countries.

INSTRUCTIONS TO AUTHORS

The BMJ has agreed to accept manuscripts prepared in accordance with the Vancouver style (BMJ, 6 February 1988, p 401) and will consider any paper that conforms to the style. More detailed and specific instructions are given below.

The following include the minimum requirements for manuscripts submitted for publication.

All material submitted for publication is assumed to be submitted exclusively to the *BMJ* unless the contrary is stated.

Manuscripts will be acknowledged; letters will not be unless a stamped addressed envelope is enclosed.

Papers will normally be refereed and may be statistically assessed before acceptance.

Authors should give their names and initials, their posts at the time they did the work, and one degree or diploma. All authors must sign their consent to publication.

Three copies should be submitted. If the manuscript is rejected these will be shredded.

Typing should be on one side of the paper, with double spacing between the lines and 5 cm margins at the top and left hand side of the sheet.

Abbreviations should not be used in the text.

Drugs should be given their approved names, not their proprietary names, and the source of any new or experimental preparations should be given.

SI units are used for scientific measurements, but blood pressure should continue to be expressed in mm Hg.

Statistical procedures should be described in the methods section or supported by references.

Tables and illustrations should be separate from the text of the paper. Tables should be simple and should not duplicate information in the text of the article.

References must be in the Vancouver style and their accuracy checked before submission. They should be numbered in the order in which they appear in the text.

Letters to the editor submitted for publication must be signed personally by all authors, who should include one degree or diploma.

The editor reserves the customary right to style and if necessary shorten material accepted for publication and to determine the priority and time of publication.

Detailed instructions are given in the $BM\mathcal{F}$ dated 7 January 1989, p 40.