

EDITOR'S FOCUS

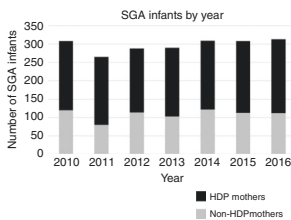
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Early Career Investigator



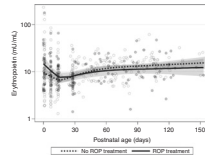
Congratulations to Melissa Smarr, the Early Career Investigator for August. After early-childhood exposure to environmental hazards and then moving to suburban communities, Dr. Smarr realized the disparities in exposure to environmental hazards as well as in the vulnerability of certain population subgroups. Inspired by this realization, she obtained a PhD from the University of Michigan's School of Public Health, focusing on prenatal exposure to air pollution and fetal growth. Through her experiences, she became passionate about investigating modifiable environmental exposures in perinatal and pediatric research. That passion is reflected in the article by Smarr and her colleagues on acetaminophen exposure and fetal growth. Her advice? Be open-minded and ready to explore new directions! [See pages 144 and 261](#)

SGA infants born to hypertensive vs. nonhypertensive mothers



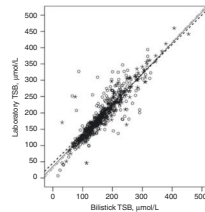
ElSayed et al. investigated 2081 small-for-gestational-age (SGA) infants retrospectively to assess outcomes. They found that SGA infants born to hypertensive mothers had better survival and lower rates of bronchopulmonary dysplasia than SGA infants born to normotensive mothers. [See page 269](#)

Erythropoietin and retinopathy of prematurity



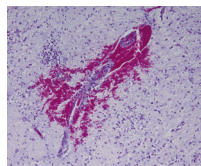
Lundgren et al. describe a cohort study of very small preterm infants (<28 weeks of gestation) and their serum erythropoietin levels during their neonatal course in the intensive care unit. They found that anemia during the first 7 days of life is highly predictive of developing higher-grade retinopathy of prematurity (ROP) whereas elevated erythropoietin levels are not, indicating that treatment of early anemia might be an avenue to preventing ROP. Also in this issue, a mother of two premature infants reflects on the stressful parenting role. [See pages 276 and 283](#)

The Bilistick method for point-of-care TSB measurement



In 561 infants in two Malaysian hospitals, Boo et al. compared laboratory measurements of total serum bilirubin (TSB) to those obtained using the Bilistick point-of-care method. They found that the Bilistick method had a shorter turnaround time for results and was more accurate at lower concentrations of TSB. In a Comment, Dani points out the importance of having such a tool. [See pages 216 and 147](#)

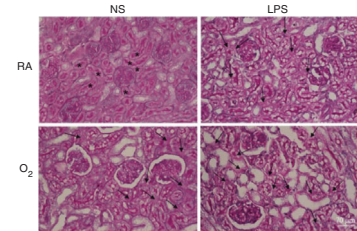
UCB vs. MSCs for neuroprotection of inflammation-induced brain injury



Using fetal sheep, Paton et al. induced inflammation with lipopolysaccharide followed by infusion of either umbilical cord blood (UCB) or mesenchymal stem cells (MSCs). UCB appeared to have a greater

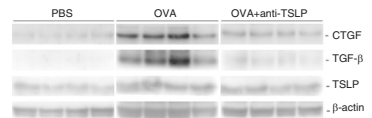
neuroprotective effect. Davis and Pursley present a Comment on these cell-based therapies. [See pages 165 and 145](#)

Maternal inflammation exacerbates neonatal hyperoxia-induced kidney injury



An increasing number of studies are showing the vulnerability of the fetal and perinatal kidney. The article by Chen and Chou is a good example of such a study. Near-term rat dams were given lipopolysaccharide (LPS) to induce inflammation. The pups were reared in either room air or 85% oxygen for 2 weeks, after which the kidneys were examined. The damage caused by hyperoxia was exacerbated by the LPS. [See page 174](#)

TSLP mediates airway remodeling in asthmatics



Lin et al. used a mouse model of asthma using ovalbumin. Mice treated with an antibody to thymic stromal lymphopoietin (TSLP) exhibited reduced airway responsiveness, decreased inflammatory mediators, and reduced airway structural changes. A diagram of the proposed mechanism is also provided in this issue. [See pages 181 and 285](#)