

Introduction to gender editorials

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Editorial Note: This is the final group of editorials in "The Gender Initiative," a series published in the *Journal* beginning with the September 2003 issue, addressing gender differences in the surgical treatment of cardiac, vascular, and thoracic disease. Dr Andrew Wechsler, the editor-in-chief, and I sincerely hope that the readers found the series to be both informative and provocative.

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See related editorials on pages 346 and 352.



In previous issues of the *Journal*, several editorials have discussed gender differences in cardiovascular disease. In this issue, editorials focus on gender-related issues in general thoracic surgery, highlighting two areas—lung cancer and lung transplantation. Of course, these topics do not address all of the potential gender-related differences in our subspecialty. One could ask, for example, why some benign pulmonary diseases (eg, lymphangioleiomyomatosis or chronic eosinophilic pneumonia) have a strong female predominance or why esophageal adenocarcinoma in Barrett's esophagus is far more common in men than in women. Indeed, these two editorials ask more questions than can be currently answered and emphasize the opportunities for research in gender-related differences. In the age of molecularly based diagnosis, it should be possible to study whether perceived gender differences are real and, if so, why. Potential differences in treatment outcomes between men and women also warrant investigation. We hope that these editorials will prompt further discussion and encourage research.

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