Commentary
What's New in Shock, September 2009?

Basic Science Aspects

Inhibition of NF-κB Activity Prevents Downregulation of α1-Adrenergic Receptors and Circulatory Failure During CLP-Induced Sepsis

Second-Generation Sulfonylureas Preserve Inhibition of Mitochondrial Permeability Transition by the Mitochondrial K⁺/ATP Opener Nicorandil in Experimental Myocardial Infarction

Role of Neuronal Nitric Oxide Synthase in Ovine Sepsis Model

The Novel Inosine Analogue INO-2002 Exerts an Anti-Inflammatory Effect in a Murine Model of Acute Lung Injury

Evdiamine Represses Hypoxia-Induced Inflammatory Proteins Expression and Hypoxia-Inducible Factor 1α Accumulation in RAW264.7

Rivastigmine Reverses Habituation Memory Impairment Observed in Sepsis Survivor Rats

Effects of Carvedilol on Mortality and Inflammatory Responses to Severe Hemorrhagic Shock in Rats

Delay of LPS-Induced Acute Lung Injury Resolution by Soluble Immune Complexes is Neutrophil Dependent

Choline or CDP-Choline Alters Serum Lipid Responses to Endotoxin in Dogs and Rats: Involvement of the Peripheral Nicotinic Acetylcholine Receptors

Attenuation of the Effects of Rat Hemorrhagic Shock with a Reperfusion Injury-Inhibiting Agent Specific to Mice

A New Dynamic Porcine Model of Meningococcal Shock

Improving Effect of Pretreatment with Yiqifumai on LPS-Induced Microcirculatory Disturbance in Rat Mesentery
Peroxisome Proliferator–Activated Receptor–γ Ligands 15-Deoxy-Δ12,14-Prostaglandin J2 and Pioglitazone Inhibit Hydroxyl Peroxide-Induced TNF-α and Lipopolysaccharide-Induced CXC Chemokine Expression in Neonatal Rat Cardiac Myocytes

Attenuation of Pulmonary Inflammation After Exposure to Blast Overpressure by N-Acetylcysteine Amide

Thalidomide Suppresses Sclerosing Encapsulating Peritonitis in a Rat Experimental Model

Acute Liver Injury and Biomarkers: A Biological Lesson from Indocyanine Green

A Large-Bolus Injection, But Not a Continuous Infusion of Sodium Selenite Improves Outcome in Peritonitis

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COVER: Area of hemorrhage (B) and inflammation (C) 2 days after blast at high power. Arrows indicate alveolar septa expanded up to three times normal by erythrocytes, fibrin, inflammatory cells (mostly macrophages and lymphocytes), and fibroblasts (B). Alveoli contain moderate numbers of inflammatory cells (macrophages, lymphocytes, fewer neutrophils), and low amounts of fibrin and edema (pink flocculent material), hemorrhage, and cellular debris (C), also normal lung (A). Magnification: 200x. See Chavko et al., pages 325–331, 2009.