EDITORIAL

Read science differently, look at science differently, and publish your science differently

Dorel Săndesc¹

¹Faculty of Medicine, "Victor Babes" University of Medicine and Pharmacy, Timisoara, Romania

Correspondence to:

Dorel Săndesc, MD, PhD, Professor, Faculty of Medicine, „Victor Babes” University of Medicine and Pharmacy, Timisoara, Romania
E-mail: dsandesc@yahoo.com

Conflicts of interests

Nothing to declare

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Conflict of interest

All received articles should include a statement regarding the conflict of interest, both financial or of a different nature. If one or more authors have any kind of conflict of interest they must be declares. If there is no type of conflict of interest this should be stated as "Nothing to declare".

Hence, we are taking this road together, with an ambitious project that wishes to bring to the international community's attention the best scientific articles, as well as to unite researchers

and clinicians worldwide under the roof of this new scientific platform. We want to believe that CEJCR will represent a new era in the field of scientific publishing.

In order to achieve this purpose we need help to make this journal "grow", a goal that can only be achieved together, with your valuable contributions. We want to kindly ask you to contribute together with your research groups and PhD students with scientific articles for the following issues of the journal.

The first number will be published in September and launched at the International Conference for Guidelines and Protocols in Anaesthesia, Intensive Care and Emergency Medicine 2018, that will be held in Chisinau, Republic of Moldavia.

CEJCR has successfully passed all the verification steps of the DeGruyter Ltd editorial house, and following this recognition will be assigned a separate page in their search engine. Moreover, the journal will be indexed starting with the first issue in numerous international databases (Scopus, ProQuest, WorldCat, DOI).

We plan to begin the verifications requested by PubMed Central in January 2019, while the verifications for Thomson Reuters (Analytics) will start at the end of next year. All these steps that we are willing to take are only made possible by your interest and professionalism and therefore we would like to thank all of you for the support.

LETTER TO EDITOR

Recurrent Wheezing

Ioana M.Ciuca^{1,2}, Elena Margau^{2,3}

¹*Pediatric Department, University of Medicine and Pharmacy "Victor Babes" Timisoara, Timisoara, Romania*

²*Clinic II Pediatric, Clinical County Hospital Timisoara, Timisoara, Romania*

³*Pediatric Hospital Louis Turcanu, Timisoara, Romania*

Correspondence to:

Assistant professor Oana M.Ciuca, PhD, Pediatric Department, University of Medicine and Pharmacy "Victor Babes" Timisoara; Clinic II Pediatric, Clinical County Hospital, Timisoara, Romania

Contact address: Romania, Timisoara, Evlia Celebi street 1-3

E-mail: ciuca.ioana@umft.ro

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These authors take responsibility for all aspects of the reliability and freedom from bias of the data presented and their discussed interpretation.

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Introduction

Wheezing is the most frequent clinical finding in pediatric pulmonary disorders, approximately 30% of children manifest an episode of wheezing during their lives [1,2].

Recurrent wheezing, demonstrated by repeating attacks of wheezes is a common complaint in pediatric everyday practice. Having a high chance to happen, the progression into asthma in some cases with recurrent wheezing lay down a possibility of early treatment modalities before development of pulmonary remod-

elling phenomenon and deterioration of pulmonary functions [3].

Accordingly, noticable discussions have erupted regarding the classification and treatment of preschoolers complaining of wheezing episodes and in order to wrap them up, the primary aetiology and pathophysiological mechanisms of these episodes have to be accurately explained [1,4,5].

Epidemiology

Recurrent wheeze and dyspnea in preschool children was studied in more cohort studies on a large-scale age. As a landmark study