violence in dating relationships perpetrated by secondary-school adolescents in 10 Brazilian cities. The hypothesis is that reciprocity pattern prevails and that female adolescents show the highest rates of perpetration. A sample of 5205 adolescents, aged 15–19, from state to private schools, was investigated, using the Conflict in Adolescent Dating Relationships Inventory. The majority of participants were female adolescents (59%). The prevalence of violence perpetrated by male adolescents stood at 22.4%, whereas for the female participants it was 39.4%. The analysis of the directionality pattern shows that in most relationships both partners practiced aggression, corroborating the evidence for violence reciprocity. This pattern was found in four out of the ten cities, while in the other six, violence perpetrated by female adolescents reached the highest prevalence rates (average of 43.1%). However, in all ten cities, violence perpetrated only by male adolescents shows lower prevalence levels, reaching an average of 9.7%. In line with other studies in Brazil and the USA, female adolescents seem to be more violent than male teenagers, contradicting common sense and the findings from studies on violence among adult couples, in which case women are the main victims. Further investigation is needed into the following aspects: severity and frequency of violent acts; evolution of violence dynamics from dating to adult relationships, and the underlying reasons in context in which violence occurs.

**Results** Lung cancer mortality accounted for approximately 12% of the overall neoplasia-related mortality during the period. There was a trend towards an increase for both genders and in all regions, except for the male population in the southeast region, whose rates remained steady between 1979 and 2004. The highest rates were observed in the south and southeast regions. However, the northeast region was the one that presented the greatest increase, followed by the central-west and north regions. In all regions, the increase in mortality rates was higher in women.

**Conclusion** The increase in lung cancer mortality in Brazil between 1979 and 2004 requires public measures that can minimise exposure to risk factors, mainly tobacco, and allow greater access to healthcare facilities for diagnosis and treatment.

**Methods** Mortality data by gender and geographic region were obtained from the Mortality Database created by the Ministry of Health in 1975. Demographic data were collected from the national censuses, from population counts, and from population estimates made in non-census years. Mortality rates were standardised according to the direct method, and the trends were analysed by gender and geographic region using the Prais-Winsten method for generalised linear regression.

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