Drugs causing fixed eruptions: J. S. Pasricha (Dept Dermato-Venereol, AIIMS, New Delhi) Brit J Dermatol, 100: 183-185, 1979.

Forty patients having fixed drug eruptions were subjected to provocation tests. Twelve patients failed to complete provocation tests, while in the remaining, the causative drugs were shown to be tetracyclines (6), analgin (metamizole) (6), oxyphenbutazone (5), phenobarbitone (4), sulphadiazine (3), sulphaphenzole (2), penicillin (1), sulphadimethoxone (1), Saridon (1), Sulphadimidine (1) and sulphamethoxypridazine (1). There was evidence of cross-sensitivity between tetracycline and demethylchlortetracycline and also between oxyphenbutazone and phenylbutazone, but not between different sulphonamides. In 2 cases, the minimum dose of the drug capable of reactivating the lesions was 100 mg of sulphadiazine and 50 mg of Saridon respectively.

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Some Facts About Leprosy: Dharmendra, published by Hind Kusht Nivaran Sangh, New Delhi, 4th Edn 1979 pp.45 Rs.3.00

This book is an useful armamentorium for general medical practitioners and leprosy social workers. Dr. Dharmendra has planned well all the seventeen chapters.

The clinical pictures clearly portray all features well. Emphasis is laid on the need for regular treatment with adequate dose of D. D. S. Stress is made on the prevention of deformities and ulcers and also the management, once these occur.

The chapter on socio-economic problems caused by leprosy and the measures to prevent socio-economic dislocation are very well discussed in this book.

The National Leprosy Control and responsibilities of the Social Workers are written in detail.

The book is an asset for Health Education in Leprosy and shold be read by Medical Practitioners, Social Workers as well as the public.

Dr. Dharmendra is a leading Leprologist and he can only write such an excellent book.

T. V. Venkatesan