## ABSTRACTS FROM CURRENT LITERATURE

Carcinomas following Grenz ray treatment of benign dermatoses, Mortensen AC and Kjeldsen H: Acta Dermato-Venereol (Stockh), 1987; 67: 523-525.

Grenz rays have been used for treating a variety of dermatoses and have been considered relatively safe with only minor adverse reactions such as erythema, hyperpigmentation and telangiectasia. Grenz rays are ionising radiation at 8-15 KV with a HVL of 0.018-0.036 mm Al. Over a five-year period, the authors treated five patients with carcinomas following treatment with Grenz rays for benign dermatoses. Grenz ray treatment was given for 8-19 years. Tumouis were squamous cell carcinomas and basal cell carcinomas. None of the patients had been exposed to other known carcinogens. Altogether, 19 cases (including the author's) are reported in the literature. From this it is clear, that sequelae after Grenz ray therapy may be severe. So authors stress caution in applying Grenz ray treatment for benign dermatoses.

N Sasi

Dorfman-Chanarin syndrome, Srebrnik A, Tur E, Elman M et al : J Amer Acad Dermatol, 1987; 17: 801-808.

Dorfman-Chanarin syndrome was first described by Dorfman et al in 1974. It is an autosomal recessive multisystem disorder of neutral lipid metabolism manifesting as congenital ichthyosis, vacuoles in the leukocytes, and variable involvement of liver, muscle, central nervous system and the auditory system. The syndrome is described in two sisters of Jewish-Iraqi origin. Ten other cases have been described including Palestinians, Italians and one Ugandan-Asian woman. Leukocyte

vacuoles were demonstrable in two asymptomatic members of the family—the father and a heterozygous twin brother of the second patient. Affected patients show deposition of neutral lipids in the skin, muscles, liver and granulocytes.

Joyce Thomas

Pustular secondary syphilis, Noppakun N, Dinchart SM and Solomon AR: Internat J Dermatol, 1987; 26: 112-114.

Pustular secondary syphilis is a rare form of secondary syphilis. It is usually said to occur in debilitated individuals. It may be associated with other forms of secondary syphilis. Miller divided pustular secondary syphilis into four types depending on the morphology. These are; small acuminate, large acuminate, flat pustular and pustulo-ulcerative types. Important histopathological features are a non-caseating granulomatous infiltrate, and a dense perivascular lympho-plasmacytic infiltrate in the dermis. Here the authors have reported a case of secondary syphilis in a 22-year-old woman who had high fever and cutaneous lesions which were undergoing regression and were gradually getting replaced by new ones. The lesions were mainly follicular and perifollicular pustules with a few papulo-squamous lesions. The anterior and posterior cervical lymph nodes and the palating tonsils were enlarged. There were no genital lesions. Her blood VDRL was 1:128. FTA-ABS test was positive. A diagnosis of pustular secondary syphilis was made. She responded to benzathine penicillin 2.4 mega units IM. This is a case of pustular syphilis without an underlying debilitating illness.

K Anitha

Angioleiomyoma of the lip, Terui T, Takahashi M and Tagami H: Internat J Dermatol, 1987; 26: 119-120.

A cutaneous angioleiomyoma is usually a solitary well-circumscribed subcutaneous nodule measuring upto 4 cm in diameter. It is mostly found on the legs of middle-aged women. It may be painful or tender. It has to be differentiated from other tender tumours like glomus tumour, neuroma, neurilemmoma and eccrine spiradenoma. Histopathologically, the leiomyoma is situated in the deep lamina propria and is made up of bundles and masses of smooth muscle fibres and vascular channels. The authors report a case of angioleiomyoma of the lip in a 34-year-old Japanese man. He developed an asymptomatic semi-translucent tumour on the lower lip which was gradually increasing in size over 8 years. The tumour showed transient enlargement after drinking alcohol. Because of the site and the absence of tenderness. a diagnosis of mucous cyst was made and the lesion was excised. But histopathological report came as angioleiomyoma and thus the case was proved to be an unusual presentation of the same.

K Anitha

Oculomotor dysfunction in patients with syphilis, Rosenhall U, Lowhagen G and Roupe G: Genitourin Med, 1987; 63: 83-86.

Involvement of the central nervous system in early syphilis is well documented. Voluntary rapid and slow eye movements are performed by the oculomotor system which involves centres and pathways in the brain. Supratentorial or infratentorial lesions may disturb the oculomotor function. So oculomotor tests are used as sensitive test for lesions in certain locations in the cerebrum, cerebellum or brain stem. The authors studied 4 patients with syphilis who were subjected to oculomotor and audiological tests to detect any subclinical

syphilitic lesion in the central nervous system. The oculomotor test result was abnormal in all four patients. Three of the patients had alterations of the smooth pursuit eye movements. Smooth pursuits can be affected by lesions located in various parts of the brain. Two patients had abnormal horizontal voluntary saccades. This may occur either with supratentorial or with cerebellar lesions. Another patient had deranged smooth pursuit eye movements as well as hypometric saccades and abnormal auditory brain stem response. These indicate ponto-cerebellar dysfunction. Authors conclude that occult brain dysfunction might be even more common in early syphilis than has previously been assumed.

K Pavithran

Netilmicin: New approach to treating gonorrhoea, Soltz-Szots J, Kopp W, Gebhart W et al: Genitourin Med, 1987; 63: 95-97.

All currently used drugs in the treatment of gonorrhoea have the disadvantages of causing allergic and toxic reactions, development of bacterial resistance and treatment failures. A drug recommended for routine treatment of gonorthoea should have high cure rate (not less than 95%), should be effective against PPNG strains, should not induce resistance and should be effective against pharyngeal gonorrhoea. Here the authors used netilmicin, a semisynthetic aminoglycoside derived from gentamicin C 1 a, in 1200 patients with uncomplicated gonorrhoea. The authors had good results in a pilot study with this drug. This prompted them to use it on a large scale. Each patient received a single dose of 300 mg netilmicin by intramuscular injection. Efficacy of treatment was assessed by smear microscopy and culture which gave negative results in all 1200 patients. No serious side effects were reported. It is concluded that netilmicin is a safe and effective drug for the treatment of uncomplicated gonorrhoea.

K Pavithran

Sexually communicable micro-organisms in human samples to be used for artificial insemination by donor, Tjiam KH, Van Heijst BVM, Polak-Vogelzang AA et al: Genitourin Med, 1987; 63: 116-118.

Artificial insemination by donor (AID) is very often used in cases of infertility. In view of the increased incidence of sexually transmitted diseases, it seems important to subject the semen samples for tests to detect or isolate various micro-organisms that cause these diseases. The authors tested 237 samples of semen for AID, collected from 10 institutes in Belgium and Netherlands. The samples were tested for Neisseria gonorrhoeae, Chlamydia trachomatis, Mycoplasma hominis, Ureaplasma urealyticum, herpes simplex virus and cytomegalo virus. It was found that 47% of all samples were infected with one or more of the micro-organisms. Ureaplasma urealyticum was isolated from 35.9% of samples, Chlamydia trachomatis from 6.3%, Mycoplasma hominis from 4.6% and cytomegalo virus from 0.4% of samples. This study indicates screening and examination of both the donor and the semen before insemination to prevent iatrogenic infections in women. Only frozen samples of semen should be used for AID purposes.

K Pavithran

Outpatient treatment of perianal warts by scissor excision, McMillan A and Scott GR: Genitourin Med, 1987; 63: 114-115.

Treatment failure and recurrence are the common problems seen after treatment of

venereal warts with podophyllin. The authors used a simple surgical technique for the removal of perianal warts. The warts were excised using fine pointed curved scissors and toothed dissecting forceps, after preliminary cleaning and local anaesthesia. After excision, the elliptical wound was 3 mm long. The area was dressed with sterile swabs and the patients were asked to change it three times daily for 2 to 3 days. Patients were followed up at 1, 2, 4, 8 and 12 week intervals. Recurrence of wart was noted in only two of the 24 patients who attended for 3 months as follow up. This method of scissor excision of perianal warts is suitable for use in outpatient departments.

K Pavithran

Treatment of uncomplicated gonorrhoea in women with a combination of rifampicin and erythromycin, Boakes AJ, Loo PSL, Ridgway GL et al: Brit J Vener Dis, 1984; 60: 309-311.

One hundred women with uncomplicated gonorrhoea (in 5 cases due to penicillinase producing strains of *Neisseria gonorrhoeae*) were treated with a single oral dose of rifampicin 900 mg and erythromycin stearate 1 gm. *N. gonorrhoeae* were isolated from the oropharynx of one patient who was infected with a PPNG strain, but were eradicated from the genital tract in 100 per cent of cases. The combination eradicated *C. trachomatis* from only 10(28%) of the 36 patients infected. Side effects were predominantly mild and consisted of transient nausea. The treatment merits evaluation in areas with a high incidence of PPNG strains.

Govind Srivastava

Notice Notice Notice Notice Notice Notice Related to the absence of protein C in blood, Marciniak E, Wilson HD and Marlar RA: Blood, 1985; 65: 15-20.

To confirm the pathogenesis and genetic background of neonatal-onset purpura fulminans, two unrelated infants with this rare thrombotic syndrome and 47 of their asymptomatic relatives were studied. In both families, 27 subjects with hereditary partial deficiency of protein C which represents the precursor of a proteolytic enzyme with potent anticoagulant properties, including both parents of each patient were identified. The patient in whom it was possible to evaluate protein C directly, showed no detectable levels of this plasma component. These findings confirm the linkage of neonatal purpura fulminans to a genetic trait with established Mandelian transmission and strongly suggests that the syndrome is an expression of homozygocity for protein C deficiency. The dramatic clinical picture and the type of pathologic changes that developed as a result of the lack of circulating protein C emphasizes the vital role of this protein in protection from thrombin generation, mainly within the microvascular system.

Govind Srivastava

An experimental model of staphylococcal scalded skin syndrome, Xu-Chun Q and Feng-e Z: Chinese Med J, 1987; 100: 805-808.

Infant mice, with ages ranging from 2 to 90 days, were inoculated, subcutaneously or intraperitonealy, with a pure culture of group 2 phage type 55/71 staphylococci; to study an animal model of staphylococcal scalded skin syndrome (SSSS). The control mice were inoculated with non-phage group 2 staphy-

lococci or normal saline. It was found that mice aged less than 8 days developed SSSS (clinically and histologically similar to human SSSS), while those older than 12 days showed local inflammation only. Subcutaneous inoculation was found to be a more effective method than intraperitoneal inoculation. The optimum inoculating dose of staphylococci was  $9 \times 10^{.6-7}$  No response was elicited in the control group.

A Dar

A double-blind, randomised placebo-controlled trial of fish oil in psoriasis, Bittiner SB, Tucker WFG, Cartwright I et al: Lancet, 1988; 1:378-380.

Psoriasis is an inflammatory dermatosis in which disordered arachidonic acid (AA) metabolism may play an important part. It has been found that increased levels of arachidonic acid and products of the lipoxygenase pathway, especially leukotriene B<sub>4</sub> (LTB<sub>4</sub>) are found in the psoriatic plaques. Leukotriene B4 stimulates keratinocyte proliferation and induces neutrophil chemotaxis, the hallmark of psoriasis. Marine fish oils contain a polyunsaturated fatty acid called eicosapentaenoic acid (EPA) which is structurally very similar to AA. Taken orally, it is rapidly absorbed and incorporated into keratinocyte membrane lipids. It is metabolised to form prostaglandins of the 3 series and leukotriene of the 5 series, which are biologically less active than those derived from arachidonic acid and thus act as competitive inhibitors. Based on this principle, the authors conducted a double-blind study in 32 patients of chronic stable plaque psoriasis. They were randomly allocated to receive either 10 fish-oil capsules (Max EPA) containing 1.8 gm of eicosapentaenoic acid or 10 placebo capsules (olive oil) daily. Patients were specifically instructed not to change

their normal diet. The treatment lasted for 12 weeks with assessments every 4 weeks. Twenty eight (88%) and 24 (75%) of the patients completed 8 and 12 weeks respectively of the trial. After 8 weeks' treatment there was a statistically significant lessening of itching, erythema and scaling in the active treatment group, with a trend towards an overall decrease in body surface area affected. No change occurred in the placebo group. The authors conclude that this controlled study confirms

findings in open trials that dietary supplementation with EPA is useful as an adjunctive treatment in psoriasis, particularly when itching is troublesome. Interestingly, only 150 gm of oily fish consumed daily would provide the same amount of EPA as used in this study. The effectiveness of EPA could probably be improved by increasing dictary intake of marine fish and reducing that of foods with a high AA content.

D A Satish