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Fast neutron treatment for squamous cell carcinoma of the head and neck

A minimum follow up of five years is now available on 165 patients entered into the Edinburgh randomised trial comparing neutron treatment (85 patients) with megavoltage (photon) radiotherapy (80 patients) in squamous cell carcinoma of the head and neck. On p 1241 MacDougall *et al* report that rates of long term local control were similar in the two groups, being achieved in 37 patients after neutron treatment and 36 after photon treatment. Necrosis was more common after neutron treatment, and seven patients who developed necrosis died whereas no deaths were associated with photon treatment.

Comparison of non-mydriatic retinal photography with ophthalmology

Advances in laser treatment allow preservation of sight for most people with severe diabetic eye disease provided that it is detected early. The introduction of a Polaroid retinal camera technique to screen diabetic patients, which does not require prior use of mydriatic drops, has been followed by controversy about its practical usefulness. On p 1243 Taylor *et al* report the results of a two year comparison of the technique with ophthalmoscopy (with mydriasis) in six diabetic clinics. Non-mydriatic retinal photography was significantly better for detecting maculopathy, and over twice as many eyes received laser treatment as a result of its detection by camera screening compared with that by ophthalmoscopy. Camera screening was as good as ophthalmoscopy in detecting disc and retinal new vessels. An unexpected finding was that availability of Polaroid retinal photographs had a striking educational impact in patients and doctors. By making the facility mobile the fairly expensive equipment may be utilised throughout the week rather than only for one or two sessions in a static clinic environment, which is an advantage when considering the logistics of screening about one million people with diabetes in the United Kingdom.

Lipoprotein (a) and coronary heart disease

There seems to be general agreement that lipoprotein (a) is associated with coronary atherosclerosis and myocardial infarction, but this has not been corroborated by prospective data. On p 1248 Rosengren *et al* report a prospective case-control study in a general population sample of men aged 50 at baseline (1983-4). Serum samples were frozen at the time of the baseline examination and kept at -70°C for six years, when the lipoprotein (a) concentrations in the samples were measured in cases and controls. By the end of the six

years 31 of the 776 participants had either suffered a non-fatal myocardial infarction ($n=22$) or died of coronary heart disease ($n=9$). After excluding men with a previous history of myocardial infarction or incomplete data there were 26 cases and 109 randomly selected controls for analysis. Men who suffered coronary heart disease in the six years were found to have had significantly higher serum lipoprotein (a) concentrations at baseline than controls. Men with the highest fifth of serum lipoprotein (a) concentrations (cut off point 365 mg/l) had a rate of coronary heart disease more than twice that of men with the lowest four fifths of concentrations. Logistic regression analysis showed that the serum lipoprotein (a) concentration was significantly associated with coronary heart disease independently of other risk factors. Though further study is required in relation to levels of other cardiovascular risk factors, the findings of Rosengren *et al* confirm that the serum lipoprotein (a) concentration in middle aged men is an independent risk factor for subsequent coronary heart disease.

Ear wax removal: a survey of current practice

The otolaryngological procedure most commonly performed by general practitioners is ear wax removal. There are no widely accepted indications and optimum methods for this procedure, which is a frequent cause of iatrogenic problems. Patients often see wax as a pathological secretion causing deafness and request its removal. On p 1251 Sharp *et al* report a survey of the methods employed by local general practitioners to remove ear wax. They identified the frequency and complications of the methods used. The study also reports that a gain of only 5 dB is achieved. Should wax therefore be removed simply for "improvement of hearing"? A list of indications and contraindications is given and may help to reduce the frequency and associated complications of wax removal.

Psychological disturbance in children with haemophilia

The prognosis for children with haemophilia was first improved by factor concentrate and then worsened by the contamination of that concentrate by HIV. What effect does haemophilia, and the shadow of HIV, have on the children? On p 1253 Logan *et al* describe a study planned to assess the impact of haemophilia but carried out after the risk of HIV infection had become a reality. They carried out a detailed psychological assessment of 43 children with haemophilia, 46 with diabetes as a control group of children with a chronic illness, and 42 healthy children. In contrast to expectations the children with haemophilia were no more disturbed than their diabetic or healthy peers. HIV positive children were no more liable to disturbance than their peers and, in this small sample, knowledge of HIV state was unrelated to psychiatric outcome.