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Parental occupation and childhood leukaemia

The incidence of childhood leukaemia has been found to be increased in certain areas of the country, but despite much research no cause has been firmly identified. McKinney *et al* (p 681) studied the association of childhood leukaemia with parental occupation and exposures for specific periods. They found that for fathers, exposure before and around the time of their children's conception was most important. Although the study was epidemiological and exposure was not quantified, the results suggested an increased risk associated with fathers' preconceptional exposure to benzene, wood dust, and ionising radiation. These results should be interpreted with caution because of the small numbers and overlap with another study. The study shows the importance of considering time of exposure when examining parental risk factors for childhood disease.

Childhood leukaemia near Dounreay

On p 687 Urquhart *et al* report the findings of a case-control study to investigate the apparent excess of leukaemia and non-Hodgkin's lymphoma in children around the Dounreay nuclear installation, a study recommended by the Committee on the Medical Aspects of Radiation in the Environment. The number of cases of leukaemia in the Caithness area was too small to estimate reliably the contribution to relative risk of doses of radiation received by the father before conception of the child. However, in most of the cases which made up the observed excess incidence the fathers had not been exposed to large doses of radiation before conception, thus differing from the results reported for the area around Sellafield in February 1990. Although the latest results do not provide a basis for refuting the hypothesis of a possible association between paternal exposure to high doses of radiation before conception and childhood leukaemia, they do suggest that some other explanation is required for the excess incidence of leukaemia around Dounreay.

Enteroviral aetiology of postviral fatigue syndrome?

Among the viruses that have been implicated in the postviral fatigue syndrome enteroviruses have elicited attention, enteroviral specific RNA having been shown in a preliminary study of samples of muscle from patients with the syndrome. On p 692 Gow *et al* report the detection of enteroviral RNA sequences with the polymerase chain reaction in muscle of patients with the syndrome and controls undergoing surgery. They found that 53% of the 60 patients had positive results compared with 15% of the controls and conclude that

most patients with the postviral fatigue syndrome have persistent enteroviral infection of the muscle, which they suggest may cause fatigue.

Community obstetric care in West Berkshire

In response to extra workload West Berkshire implemented a system for managing the total obstetric care of low risk women entirely in the community. On p 698 Street *et al* present the results of their review of all deliveries in West Berkshire after the system was introduced. Of all 5372 women who delivered in the district, 30.1% received total care from their general practitioners and midwives. There were no adverse effects on the general outcome of obstetric care compared with that in 1987, when conventional consultant care and shared care were in operation, showing that community antenatal care of low risk women is a safe alternative.

Diagnostic protocols for cerebellopontine angle lesions

Whether suspected tumours of the cerebellopontine angle should be investigated with electrophysiological tests or computed tomography is currently debated. Swan and Gatehouse assessed the diagnostic efficiency and costs of current protocols for investigation in 270 consecutive patients attending an otolaryngology clinic. Their findings (p 701) show that parallel tests of auditory brain stem responses and electronystagmography and calorics in series with computed tomography missed tumours or exceeded the cost of computed tomography for all patients whereas tests of auditory brain stem responses and acoustic reflex thresholds in series with computed tomography are clinically and economically justified.

Venous thromboembolism over 30 years

The advent of prophylaxis for thromboembolism and the adoption of early mobilisation after operations, myocardial infarction, and stroke might be expected to have reduced the incidence of venous thromboembolism in hospital patients. On p 709 Lindblad *et al* describe a study of venous thromboembolism verified at necropsy in a Swedish hospital. They found that, except in the department of orthopaedics, the overall incidence did not change from 1957 to 1987. Over this period, however, the average age of the population increased, and older people are now receiving more extensive surgery in procedures such as joint replacement. Data corrected for age and operative procedure (not available in the study) are needed to assess any benefits of prophylaxis and early mobilisation.

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