## BRITISH MEDICAL JOURNAL



SATURDAY 4 JUNE 1983

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We may return unduly long letters to the author for shortening so that we can offer readers as wide a selection as possible. We receive so many letters each week that we have to omit some of them. Letters should be typed with double spacing between lines and must be signed personally by all their authors, who should include their degrees. Letters critical of a paper may be sent to the authors of the paper so that their reply may appear in the same issue.

Correspondents should present their references in the Vancouver style (see examples in these columns). In particular, the names and initials of all authors must be given unless there are more than six, when only the first three should be given, followed by et al; and the first and last page numbers of articles and chapters should be included.

## Whooping cough: a shot in the dark

SIR,—We were sad to see yet another emotionally charged and misinformed television programme on pertussis vaccine (Channel 4, 6 May), just when one hoped a sense of balance was beginning to return to public perception of this vexed subject. We were particularly concerned that, since an important part of the programme concerned the results of the National Childhood Encephalopathy Study, the methods used in the study were not described accurately by Professor Gordon Stewart. He stated incorrectly that the study included only children with convulsions lasting 30 minutes or more and who remained in hospital for at least 15 days. The criteria for notification of cases, which are set out fully in the study report,12 included not only most acute encephalopathic diseases (including infantile spasms and Reye's syndrome), but also all cases of unexplained loss of consciousness and all cases of "fits or series of fits lasting about half an hour or more, or with coma lasting two hours or more, or with other neurological signs not previously present lasting 24 hours or more." Thus the

range of clinical conditions included was far wider than Professor Stewart implied. Moreover, although admission to hospital was a criterion for entry into the study, the duration of stay in hospital was not, and all children who satisfied the notification criteria were included in the analysis and risk estimates, irrespective of length of stay.

In view of the far reaching implications of their conclusions and their dependence on the results, we regret that the programme producers did not consult any member of the National Childhood Encephalopathy Study team about the study or its findings. We should also like to emphasise that the study was not a "government study" but the work of an independent university department, undertaken with the collaboration of the relevant professional bodies after full and rigorous peer review. Professor Stewart himself was among those consulted during the formative stages about the design of the study, which, in writing to us at the time, he described as a "very comprehensive scheme." He also promised to forward to us details of any cases which came to his attention. In these circumstances it is surprising that he now criticises the adequacy of the study.

The programme was unsatisfactory in a number of other respects. Most importantly, it failed to make sufficiently clear that there are many causes of brain damage, known and unknown, and it is impossible to be certain that vaccine was responsible in individual cases.3 We could cite examples of sudden unexpected death and neurologically crippling illnesses that occurred in seemingly well children shortly before they were due to be vaccinated. Had they been vaccinated as planned, the vaccine would no doubt have been blamed for the subsequent damage. The circumstantial nature of much of the evidence that pertussis vaccine causes brain damage must be made clear to avoid causing unnecessary alarm and distress to parents.

Finally, the programme concluded by offering the presenters' personal calculations of risks and benefits from pertussis immunisation. Such calculations, based on simplistic assumptions but superficially plausible to the