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SKIN DISEASES AND BURNS

967 Menthol Urticaria. E.M. McGowan. Arch. Dermatol. 94, 62-63 (July, 1966).

A case of urticaria attributed to menthol is reported in a young girl exposed to mentholated cigarettes, cough drops, aerosol room spray, and topical mentholated medicaments. The eti was suggested by the history of exposure and was established by the results of oral challenge 10 mg. menthol in 50% ethanol. A mild urticarial reaction and a fall in the total circulating basophil leukocytes following the menthol challenge were considered diagnostic of hypersensit Skin tests to menthol were not diagnostic. A direct in vitro basophil degranulation test to mei 1:5,000, showed a significant degranulation of basophil leukocytes. The urticaria resolved completely when all mentholated and minted preparations were discontinued. Two subsequent urticarial episodes followed the use of a mint-flavored toothpaste and the ingestion of a mintec iced tea preparation. -- J. Am. Med. Assn. References & Reviews

968 Schistosome Dermatitis in Association With Rice Growing in the Northern Territory of Austra A.J. Bearup and W.A. Langsford. Med. J. Australia 1, 521-525 (March 26, 1966).

A report is made of schistosome dermatitis affecting ricefield workers in Australia. Reasons are given for ascribing this condition to the presence of C. parocellata, schistosome cercari developing in the aquatic snail L. phillipsi, and experimental work on the snail host is descril The cercariae are probably derived from aquatic birds and are thought to occur throughout Australia in suitable swamps and slow-flowing streams. Methods of protecting workers from dermatitis are outlined. There are 15 references. -- Public Health Eng. Absts.

969 Subcutaneous Nocardiosis. R.H. Thorlakson and C.H. Rusnak. Can. Med. Assn. J. 95, 224-227 (July 30, 1966).

Nocardiosis is a fungous disease which is world-wide in its distribution and may affect humans as well as animals. The disease was first described in 1888 by Nocard, who had studied glanc a fungous disorder of cattle, in Guadeloupe. The human counterpart was first described by Eppinger in 1890. Since then physicians have gradually become aware of this uncommon fungu which may affect humans. The genus Nocardia is a member of the order Actinomycetales. Nocardia asteroides is the predominant species affecting humans. Only very rarely is Nocar brasiliensis reported as the cause of the disease in man. In humans the fungus may cause a chronic infection which affects chiefly the lungs and subcutaneous tissues. It may be difficult to distinguish the disease caused by the fungus Nocardia from diseases caused by the more cor mon mycobacteria of tuberculous or actinomycosis, all of which give rise to chronic granulom Nocardiosis is most likely to be confused with actinomycosis, which it closely resembles clini radiologically and bacteriologically. Both are chronic suppurative mycotic infections. In the present case a 63-year-old woman had subcutaneous nocardiosis with a nodular lesion that app at the site of an injury to the forearm, sustained 38 years before. The original wound was sai to have been contaminated by grass and soil and had taken six months to heal. The patient had suffered from rheumatoid arthritis since 1950 and had been treated with corticosteroids since No other primary sites of infection were identified and no further injury to the arms had been sustained. It is suggested that the area might have been contaminated with the fungus Nocardi at the time of injury 38 years before. If so, the length of the latent period is unusual. The pos bility that steroid therapy reactivated a dormant infection is also suggested.

970 Silver Nitrate Treatment of Thermal Burns: A Critique of Four Mortalities Under This Progr M. Lentz, R. Seaton, and B.G. Macmillan. J. Trauma 6, 399-406 (May, 1966).

Theoretical considerations in the therapy of burn wounds with silver nitrate soaks are discusse in the light of four patients, all of whom died. In three of the cases, the treatment produced a clean surface. Limited experience does not imply a condemnation of this therapeutic approach rather, it suggests that caution and experience with the treatment are necessary to avoid comp cations. -- J. Am. Med. Assn. References & Reviews

971 Use of a Topical Sulfonamide in Control of Burn Wound Sepsis. J.A. Moncrief, et al. J. Trauma 6, 407-419 (May, 1966).

The successful control of invasive burn wound sepsis by the use of a topical sulfonamide in a water-sc base has resulted in control of infection in the burn wound and the prevention of active invasive burr wound sepsis. The overall mortality has been reduced to 50% of the previous value, with the most si cant reduction in mortality occurring in the burns of 50% or less. The determination that the waxy-white, insensitive, soft burn is indeed a very deep dermal burn may be the crux of the matter. Withou

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