952 Ringworm Contracted From Cattle in Western New York State. F.R. Hall. Arch. Dermatol. 94, 35-37 (July, 1966).

Trichophyton verrucosum type of cattle ringworm was found in 121 patients over the past 17 years. Injury was a frequent precipitating factor. Possible immunity followed infection since only one recurrence was observed. Antibiotics failed even when lesions were pustular. Cultures were more successful with an agar containing cycloheximide and chloramphenicol than with regular Sabouraud's dextrose agar. There was questionable improvement from topical antifungal agents. Griseofulvin benefited the patient, especially if the medication was started early in the course of illness. -- J. Am. Med. Assn. References & Reviews

953 Wormy Eyes: A Veterinary Public Health Problem. A. Freeman. J. Am. Vet. Med. Assn. 148, 694-696 (March 15, 1966).

Visceral larva migrans occurs most often in children under four years old who ingest Toxocara canis ova, most often by sucking on toys or fingers contaminated with T. canis eggs, or by eating contaminated soil. Invasion of the eyes by this parasite has proved especially serious. T. canis is transmitted to man by dogs and cats. There are nine references.
-- Public Health Eng. Absts.

954 Human Rabies After Antiserum and Vaccine Postexposure Treatment. Case Report and Review. J.A. Anderson, F.T. Daly, Jr., and J.C. Kidd. Ann. Internal Med. 64, 1297-1302 (June, 1966).

An eight-year-old boy was bitten on the face by a rabid dog and treated within 19 hours with 2,000 International units of antirabies serum injected into the wound and buttocks, plus 14 doses of duck embryo antirabies vaccine with boosters at 10 to 20 days after the series. In spite of what was thought to be adequate therapy, the child died of rabies 90 days after exposure. The literature concerning serovaccine treatment was reviewed, and 18 known failures have been recorded; details are given here on 11 of these failures. The most likely explanations of treatment failure are that serum might not have been given soon enough to work locally and that serum antibody and vaccine antigen interference occurred. Since the incubation period of the virus is prolonged after serum had been administrated, it is probable that not enough vaccine was given. Serovaccine therapy in the past produced excellent results in large series of serious animal bites. It represents the best postexposure treatment for rabies available. However, there have been failures in this therapy, as this case report demonstrates. Perhaps by giving the serum as soon as possible after the bites (within a few hours) and giving a prolonged series of vaccine (that is, 21 days instead of 14 for serious bites of the face) plus boosters that are spaced out for a longer time interval after the basic series, one might improve these results.

955 Pulmonary Calcification in the Tumor-Like Form of Pulmonary Aspergillosis: Pulmonary Aspergilloma. J.C. Pimentel. Am. Rev. Resp. Dis. 94, 208-216 (Aug. 1966).

It would seem that there are reasons for admitting that the tumor-like form of pulmonary aspergillosis ("pulmonary aspergilloma") can be responsible for some of the calcifications that may appear in the lungs. This process has already been described in other fungal diseases especially in histoplasmosis. Nine cases are reported that illustrate the principle morphologic varieties of this process of calcification. An attempt is made to interpret the aspects described and to place them within the possible evolutional phases of pulmonary aspergillosis. There are 19 references. -- Author's summary

956 Bronchopulmonary Geotrichosis With Severe Asthma. J.D. Ross, K.D.G. Reid, and C.F. Speirs. Brit. Med. J. 1, 1400-1402 (June 4, 1966).

The fungus Geotrichum candidum occurs as a saprophyte in earth and decaying organic matter. When isolated from human sources it has generally been regarded as a commensal. In some cases the fungus has been considered the responsible pathogenic organism in a variety of conditions, the commonest being bronchopulmonary disease. The case reported here is of an adult woman with bronchial infection associated with severe asthma. Diagnosis in addition to the clinical picture was supported by: (1) isolation of fungus from sputum on 73 occasions as well as from the lining of the trachea and bronchi, (2) failure to demonstrate other pathogens, (3) thirty fold rise during course of the illness in patient's serum of agglutinating antibodies, (4) demonstration of cutaneous hypersensitivity to fungus extract. The patient required corticosteroid therapy; attempts to desensitize with a course of injections of increasing concentrations of the fungus extract gave only limited benefit. The fungus was sensitive to colistin; given intramuscularly and by inhalation, it diminished growth of fungus. -- J. Am. Med. Assn. References & Reviews

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