

- 446 Respiratory Allergy Due to Chemical Compounds Encountered in the Rubber, Lacquer, Shellac, and Beauty Culture Industries. H.H. Gelfand.
J. Allergy 34, 374-381 (July-Aug. 1963).

This study on respiratory allergy, particularly bronchial asthma resulting from exposure of employees to certain chemical compounds, indicates the presence of a circulating type of antibody. Some of these employees also exhibited allergic skin manifestations suggesting that the delayed - contact type of antibody existed concomitantly with the wheal-type circulating antibody. The study included persons exposed to chemicals in the following occupations: rubber industry, beauty culture (both operators and customers), and the handling of lacquer and shellac. Twenty-two references are given.

-- Public Health Eng. Absts.

- 447 North American Loxoscelism. Necrotic Bite of the Brown Recluse Spider.
C.J. Dillaha, et al. J. Am. Med. Assn. 188, 33-36 (April 6, 1964).

North American loxoscelism caused by the bite of the Loxosceles reclusus, the brown recluse spider, can produce a gangrenous slough at the site of envenomation and a severe systemic reaction. In 16 cases the local reaction including pain, bleb formation, erythema, ecchymosis, necrosis ending in an eschar, and ulceration. The systemic reactions may include fever, nausea, malaise, hemolysis, and thrombocytopenia. Two deaths have been reported in small children. This spider is indigenous throughout the South Central US.

-- Authors' abstr.

- 448 Mortality in 1,100 Consecutive Burns Treated at a Burns Unit. B.A. Pruitt, et al.
Ann. Surg. 159, 396 (March, 1964).

The mortality observed in 1,100 consecutive burn patients has been analyzed by probit method. The percentage of body surface burns resulting in death of 50% of patients with such burns was calculated for age groups 0-4, 0-14, 15-49, 50 and above, and found to be 42.8%, 48.5%, 55.8%, and 29% respectively. Comparison with reports for other institutions was made and agreement in mortality in similar populations noted. Shortcomings in method of probit analysis are discussed, as well as possible sources of variation between reported studies. A mortality contour curve is presented for use in predicting expected mortality in any burn patient subsequently encountered. The report notes that no significant change in burn mortality can be detected over the past 12 years, despite the use of newer antibiotics and other therapeutic "improvements."

-- J. Am. Med. Assn. References & Reviews

- 449 Defense Mechanisms in Patients With Burns. P. Decoulx, et al.
Presse med. 72, 257 (Jan. 25, 1964).

Despite all the precautions and the use of antibiotics, infection is still a major cause of death in patients with burns. The author reports 324 bacteriological studies performed on 57 patients; a total of 532 different bacterial strains were isolated. This work was performed in trying to establish the failure of anti-infectious defenses in these patients with burns. The amount of properdin in the blood of patients with burns seemed to correspond perfectly with the patients' general condition. Most of the patients who at some time had properdin levels near zero, did not survive. It was a sign of beginning recovery when properdin increased to high levels. These results are interpreted as indicative of the possibility that the intestinal mucosa of the patients with burns permits the passage of the intestinal saprophytes or their toxins into the general body economy. The authors suggest that the use of fresh blood instead of conserved blood or plasma might be of greater therapeutic value because it supplies more properdin.

-- J. Am. Med. Assn. References & Reviews

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