Summing up, therefore, I would suggest that the connexion between the "pill" and phlebitis, such as it is, is a purely mechanical one, and that the re-examination of the statistical material will show that the women on the "pill" who develop phlebitis are those who have varicose veins and are taking a "pill" with too high an oestrogen content.—I am, etc.,

London N.W.1. STANLEY RIVLIN.

REFERENCE

1 Rivlin, S., *Brit. med. J.*, 1962, **2**, 547.

SIR,—We would like to record a case of phlebothrombosis and pulmonary embolism occurring in a patient taking an oral contraceptive.

A lady of 30 years was admitted as an emergency to this hospital with a sudden history of shortness of breath for five days. Two days prior to this she had noticed swelling of the ankles, the right side more than the left. She has been on Lyndiol 2.5 (lynoestrenol 2.5 mg. and mestranol 0.075 mg.) over the last nine months and during this period she had put on 28 lb. (13 kg.) in weight. At the time of admission she had definite signs of phlebothrombosis of the right leg, and, although there were no clinical signs on examination of her chest, a chest *x*-ray showed an opacity in the right lower zone with elevation of the right diaphragm and slight prominence of the right pulmonary artery compatible with the diagnosis of pulmonary embolism. An E.C.G. provided contributory evidence, showing an S in lead 1 and a Q with inverted T in lead 3. There was no evidence of any infection, and her Hb, E.S.R., W.B.C., and differential counts were normal. Her S.G.O.T. and S.H.B.D. were normal and the liver-function tests were normal except for a raised S.G.P.T. of 66 units/ml. (normal in our laboratory 4–38 units/ml.). She was treated with anticoagulants and with this the signs of phlebothrombosis cleared up completely and a subsequent chest *x*-ray was within normal limits.

Although a number of cases have been reported of a similar nature in patients on oral contraceptives, this case raises an interesting point because of the great increase in weight starting when the patient was put on oral contraceptives. We are wondering whether this increase in weight played a contributory part in the development of the phlebothrombosis and subsequent pulmonary embolism.

This case also shows slightly abnormal liver-function tests. Similar instances of raised serum enzymes were reported by Stoll *et al.*[1] in menopausal women on Lyndiol even without any frank jaundice. Thulin and Nermark[2] mention a report of abnormal liver-function tests in young women on oral contraceptives, but mostly with only slightly increased value. It is possible that raised S.G.P.T. could be due to Lyndiol.

This case has been reported to the Dunlop Committee.—We are, etc.,

P. GHOSH.
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F. MANJOORAN.

Tehidy Chest Hospital,
Camborne, Cornwall.

REFERENCES

1 Stoll, B. A., Andrews, J. T., Motteram, R., and Upfill, J., *Brit. med.*, 1965, **1**, 723.
2 Thulin, K. E., and Nermark, J., ibid., 1966, **1**, 584.

Human Infection with Porcine Ascaris

SIR,—A male child aged 14 months developed diarrhoea, with green stools during the third and fourth days of the illness, and on the sixth day passed a worm 4½ in. (11 cm.) long, which was identified as an immature female *Ascaris*. The child was treated with a single dose of 7.5 g. Pripsen (piperazine phosphate, *B.P.*, and standardized senna, Westminster Laboratories Ltd.) the same evening, and during the night passed a further eight worms, all of which were identified as immature *Ascaris*. The worms ranged in size from 3½ in. to 5¾ in. (9–15 cm.), and all but two were females. The Pripsen treatment was repeated three weeks later, and again nine weeks later, but no more worms were passed.

The child had never been away from his home in the Brentwood area, and had been confined exclusively to the house and garden. During the early spring, pig manure, purchased in bulk from a local supplier, had been spread on the garden. Several weeks later, about six weeks before the worms were passed, the child had been seen in the garden with a small piece of the manure in his mouth. Subsequent microscopic examination of a sample of manure from the same site revealed the presence of fully embryonated *Ascaris* eggs. Some of these eggs were given orally to albino mice. Immature *Ascaris* were found in the livers of each of the mice several days later, which confirmed that the eggs were infective.

It is concluded that there is strong circumstantial evidence that the child became infected by ingesting *Ascaris* eggs from the pig manure. Unfortunately the unequivocal differentiation of human and porcine *Ascaris* species on morphological grounds is very difficult, if not impossible, especially in the case of immature worms. Cameron[1] considered that infection of man with *Ascaris* of porcine origin was undoubtedly possible, and that a study of this problem was far from academic. He also suggested that in an unusual host *Ascaris* larvae might have a greater pathogenicity than in the normal host.

Since *Ascaris suum* Goeze, 1782, is still a common infection in pigs, it is suggested that the use of pig manure in gardens is a potential health hazard, especially to young children.—We are, etc.,

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May & Baker Ltd.,
Dagenham, Essex.

J. W. RACE.

Brentwood,
Essex.

REFERENCE

1 Cameron, T. W. M., *Amer. J. med. Sci.*, 1962, **243**, 354.

Chromosomes in Hodgkin's Disease

SIR,—In our paper "Lymphocyte Transformation and Chromosome Studies in Hodgkin's Disease" (16 September, p. 704) we drew attention to the exaggeration of the secondary constrictions in C9 chromosomes observed in some peripheral blood lymphocyte cultures in our patients. Since the paper was submitted it has come to our notice that Nusbacher *et al.*[1] have observed, in addition to a high percentage of chromosome breakage, attenuation of secondary constrictions in cultures of lymphocytes from 1-year-old children with congenital rubella. There is thus evidence that in-vivo viral infection is one of the factors affecting the appearance of secondary constrictions in cultured cells. Nusbacher *et al.* also observed end-to-end association of chromosomes, which was another occasional feature of the metaphase plates of patients in our series. Thus it is possible that the peculiarity of the chromosomes which we observed in Hodgkin's disease could be due to the presence of viral infection in some of the patients.—We are, etc.,

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B. R. REEVES.

Royal Marsden Hospital
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Research,
London S.W.3.

REFERENCE

1 Nusbacher, J., Hirschhorn, K., and Cooper, L. Z., *New Engl. J. Med.*, 1967, **276**, 1409.

Medicine in Burma

SIR,—Lest misunderstanding should arise from Sir George McRobert's admirable letter concerning Burma (9 September, p. 677), I wish to emphasize that in my article I wrote that the Burmese decided "to leave the Commonwealth, and, as a corollary to this, to render themselves ineligible for aid extended to Commonwealth countries." I neither stated nor implied that they rendered themselves ineligible for aid extended to non-Commonwealth countries. Such aid has in fact been small in comparison with that given to Commonwealth countries. Thus, for example, the latest figures available from the statistical department of the Ministry of Overseas Development show that to the following countries total technical aid from Government sources given during 1965–6 amounts to:

Nigeria	£3,069,200
Uganda	£5,203,400
Tanzania	£4,383,400
Kenya	£7,453,200
Burma	£ 250,300

The three East African countries have populations very much smaller than Burma; the populations of Nigeria and Burma are roughly comparable in size; all have received aid 12 to 30 times greater than Burma over this period.

I tried particularly to bring out the point that with limited aid Burma had done much. Figures of this kind emphasize the achievement and the admiration due to them, an achievement which when aid is considered on a per caput basis appears even more spectacular.—I am, etc.,

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Anxiety State after "Sex Education"

SIR,—A 10-year-old boy known to me for most of his life returned home from his excellent boarding-school, which he would not give up for the best garden railway in the world. The relaxation of his own territory uncovered a distressing condition of general malaise, irritability, nightmares, fears