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Diploma in Pathology.—A. T. Al-Rawi, Naseem Mazhar, D. N. P. Saha, B. Sarkar, C. C. Shih.

D.M.R.D.—Shashi L. Soni.

D.C.H.—A. El K. Mustafa.

D.O.—Barbara R. Purchas.

Diploma in Medical Radiotherapy.—P. Basnayake.

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH

At a quarterly Meeting of the Fellows of the College held on 20 July 1972, the President, Dr. J. Halliday Croom, in the Chair, the following were elected Fellows: O. P. N. A. FitzGerald, R. K. Pal, M. S. Jones, R. W. Eason, J. J. H. Lowe, I. M. Scott, G. Diggle, J. M. Matheson, K. F. Woo, P. Menof, N. A. Rossiter, L. F. E. Lewis, S. J. Fleishman, S. H. B. Blaikie, H. G. H. Houghton, M. W. Archdall, A. W. O. Taylor, A. K. Das, J. S. Calnan, W. R. Lang, J. D. T. Steele, A. T. Macquene, P. B. Fox, J. Rabkin, J. H. Haldane, I. R. Wilson, W. R. St. Clair, J. H. Taylor, R. S. Walker, J. E. A. Bartlett, R. F. Maggs, H. N. Singh, W. D. Munro, H. Chai, R. K. Richardson, H. Black, J. H. Greig, R. J. Connolly, D. H. H. Pullon, M. M. Baig, C. R. R. Pillay, J. C. Phemister, W. N. D. Watson, L. Molk, J. C. Pond, P. Catzel, R. Shabetai, J. R. Kelly, J. B. Barr, S. L. Bhargava, P. C. Bajpai, K. K. Sinha, H. T. W. Jayasekara, S. E. Levin, I. R. Ferguson, K. Murray, D. C. Watler, R. J. Cantwell, D. C. Choudhury, L. C. Isaacson, J. Wilkinson, P. Dayal, Elaine H. McNeill-Smith-Read, R. Dev, N. Z. Sacks, S. P. Khatua, E. V. Pieris, V. Benjamin, J. Buchanan, J. G. Robinson, W. R. Murdoch, G. G. Habib, G. C. Anbunathan, J. D. Frankish, R. E. Cronje, S. K. Gupta, M. S. E. Ibrahim, M. Traub, E. M. Ashenhurst, M. J. A. McDonald, S. N. Basu, G. Kuppussawamy, R. Pararajasegaram, K. K. Das, A. K. Ganguly, S. K. Vaish, Keitha Farmer, A. J. Gazder, A. S. Jureidini,

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K. C. Watson was elected a Member of the College.

ROYAL COLLEGE OF OBSTETRICIANS & GYNAECOLOGISTS

At meetings of the Council held on 21 and 22 July with the President, Professor Sir Norman Jeffcoate, in the chair, T. A. Sinnathuray was admitted to Fellowship of the College, and the following admitted to Membership: M. O. Abbas, J. W. L. Ainsworth, H. C. Aitken, P. J. Armon, J. A. F. Attapattu, F. A. Aziz, J. B. Baladi, K. Biswas, M. K. Biswas, S. K. Biswas, I. McL. Brown, M. R. Buckley, A. A. Calder, A. G. Chani, A. K. S. Cheng, K. J. Cherian, H. K. Chow, L. F. Coetzee, A. A. Compton, M. L. W. Crooks, A. Danesh-Haeri, A. C. Davidson, J. P. Dey, R. Dixon, J. O. Djan, F. C. Dobson, J. B. Dodoo, S. J. Dunstone, J. W. Eddy, B. C. Elliott, M. K. S. El-Rafey, D. V. Fenton, E. M. Fernando, Hazel I. M. Furtado, R. D. Gardi, G. G. Ghosh-Ray, K. Gill, M. D. G. Gillmer, P. C. Gini, K. A. Grant, E. N. Green, W. R. Harvey, R. C. Hemsley, D. W. Hyatt, P. D. Hyland, V. Jandial, T. I. Ja'oumi, I. Jelen, R. N. Jha, Avri M. Jones, J. Kamaladevi, J. M. Kasonde, O. A. Kassim, A. Kaur, S. Kaur, A. Kenney, Z. Khanam, W. D. Kham, P. C. K. Kotonoy, J. V. Larsen, A. W. D. Laryea, Carol J. Law, G. B. Leckie, K. H. Leung, R. C. Levy, Rosemary D. McArthur, P. McCusker, A. McFarlane, D. Mack, P. Mahendran, A. F. Marzouk, G. W. S. N. Mbide, Amy Medhora, D. U. Megafu, B. Milne, A. Miremadi, A. R. Mishari, I. H. A. Mohammad, B. P. Moscrop, O. M. Mukhtar, H. D. R. Munro, A. Palmer, Leela P. Panse, F. R. Paredes-Garcia, Premilla D. Pinto, A. P. Puraviappan, S. Purohit, S. P. Quek, A. A. Raubenheimer, J. W. K. Ritchie, D. A. Rogers, A. H. Ross, R. Sabherwal, G. Sarala, K. Sen, R. Sen, D. J. J. Shale, K. Sharma, D. S. Sharp, B. H. G. Sheldon, A. Shepherd, M. R. Shihata, M. Sircar, G. R. B. Skinner, C. J. G. Sutton, I. L. Thomas, G. S. Vaughan, K. N. Yusuf, J. C. Anderson, T. M. Baer, L. W. Clark, A. J. Fairweather, G. E. Footit, D. G. Javasinghe, Jillian A. Need, J. R. L. Neil, I. D. Pearson, P. H. Pickard, G. D. Standen, A. P. Vines, R. B. Warton, R. C. Widdowson, J. F. Han, H. W. Lau, L. S. Lien, V. Sivasaratnam, G. Manukhani, A. M. S'Allam, M. E. Setchell.

* Awarded regional Council's Gold Medal.

APPOINTMENTS

LINGFIELD HOSPITAL SCHOOL.—Group Captain T. C. Nicol (medical director).

MANCHESTER REGIONAL HOSPITAL BOARD.—Mr. I. A. Khan (consultant E.N.T. surgeon, Blackpool and Fylde Group); Dr. D. G. Reid (consultant psychiatrist, East Cheshire Group); Dr. W. D. Foster (consultant pathologist, microbiology, East Cheshire Group).

UNITED MANCHESTER HOSPITALS.—Dr. B. R. H. Doran (consultant anaesthetist).

Corrections

Chloramphenicol Resistance in the Typhoid Bacillus

Owing to a printers' error, which we much regret, the authors' corrections were not made to the text of the article by Dr. E. S. Anderson and Mr. H. R. Smith (5 August, p. 329). There were a number of stylistic changes in the first part of the article and an important deletion was made in the discussion. The discussion should have read as follows:

Discussion

It can be assumed that chloramphenicol resistance will appear in *S. typhi* from time to time as the result of either mutation or the acquisition of R factors, but the Mexican outbreak seems to be the first example of its appearance in an epidemic strain. This is the type of event most feared by

those who are studying the ecology of R factors, because chloramphenicol is the drug of choice in the treatment of typhoid fever. It can be accepted that the R factor in this strain of *S. typhi* originated in one of the non-pathogenic enterobacteria.

The ultimate appearance of epidemic strains of *S. typhi* carrying R factors coding for chloramphenicol resistance is most likely in countries where two conditions are satisfied. The first is that typhoid fever must be common, so that the organism is frequently present in the human intestine. The second condition is that chloramphenicol should be used indiscriminately, so that its widespread selective pressure will promote the emergence of stable R factors coding for the respective resistance. Both these conditions are satisfied in Mexico: it is a country with a relatively high incidence of typhoid fever; and not only is chloramphenicol used on a large scale by doctors but it can be bought by the general public.

The C.D.C. commented that "although detailed studies have not been completed, it appears that many of the patients infected with resistant strains responded poorly to therapy with chloramphenicol, necessitating the use of other antibiotics, principally ampicillin" (C.D.C. Weekly Report, 1972a).

The poor response to chloramphenicol is hardly surprising, but ampicillin, to which the Mexican strain is sensitive in vitro, has proved a disappointment in general for the treatment of typhoid fever, and it would be an error to regard it as anything better than a second-line drug in this respect.

The appearance of this strain of *S. typhi* in British patients is yet another demonstration that, with the extent and speed of modern travel, infection can be rapidly conveyed between widely separated countries. If the causal organisms have additional unwelcome features such as chloramphenicol resistance in *S. typhi*, they present the patients concerned with an augmented risk, because the most effective therapy cannot be used.

Although the importation of chloramphenicol-resistant *S. typhi* is undesirable it need not arouse alarm in Britain, because opportunities for the spread of typhoid in this country are negligible. Nevertheless, if epidemics caused by chloramphenicol-resistant *S. typhi* occur on a sufficiently large scale in countries of high typhoid incidence, such organisms may spread to other countries often enough to present an irksome problem, and the possibility of residual carriers of these imported strains cannot be discounted. The British cases of typhoid infected in Mexico, and the epidemic which caused them, are a warning of this, and are a reminder that if antibiotics such as chloramphenicol are to retain their efficacy for important diseases, their use should be largely if not entirely restricted to those diseases throughout the world.

Supersonic Radiation Risks

In the letter from Dr. M. C. O'Riordan (29 July, p. 289) the unit of exposure rate should have been given as mR/h instead of mrem/h. We regret the error.

Notice to Authors

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