Correspondence
ANNE MOLLER, of ray x point only fluid had except screening, including analysis of is report Case paraffins point lighting charcoal is water. paraffins a addition cultured. media, various attention to sulphonamide, tetracycline, and blood agar and water in erythromycin, and patient procedes bacteriologically. After they crawled over plates of blood agar and CLED agar they were killed, cut up, and inoculated on to various media, which were then incubated aerobically and anaerobically. The water in which the leeches had been transported was similarly cultured. A hydrophila was isolated from the three sets of cultures; in addition a strain of Providencia spp was isolated from the transport water. The isolates of A hydrophila had the same pattern of antimicrobial sensitivity as that reported by Millership et al—that is, they were sensitive to sulphonamide, tetracycline, chloramphenicol, gentamicin, tobramycin, and both cefuroxime and cefotaxime. They were resistant to ampicillin, trimethoprim, erythromycin, and cephradine.

Comment

Leeches commonly harbour A hydrophila. Whitlock et al drew attention to the possible risk of infection with this organism as a result of using leeches in microsurgery but did not themselves report any such infections. The wound infection described here was almost certainly acquired from the leeches used to decongest the flap in the reconstruction of the patient’s breast. Although not common, infection due to A hydrophila has been reported to have been acquired from various sources including fresh water, and clearly it cannot be disregarded as a human pathogen. Our report confirms that the leech is a potential source of wound infection.

We thank Mr M H C Webster for allowing us to report this case and Professor Morag C Timbury for helpful advice.

References

we had completely recovered. Chest x-ray film showed almost complete disappearance of the pulmonary abnormalities.

Comment

Inhalation or aspiration of paraffin produces two types of lesion: one is acute with pneumonia caused by massive administration into the lungs, and one is chronic with fibrosis and granulomatous reaction. The case described shows the acute form, which seems to be rare but easily diagnosed. The chronic type is seen in patients who use paraffins as purgatives or as nose drops. That reaction is caused by repeated aspiration or inhalation of small amounts of paraffin, is more difficult to diagnose, and should be remembered when a patient presents with unspecific nodular pulmonary changes on chest x-ray examination.

Paraffins are non-corrosive and are solvents of lipids, which most probably cause the damage to the lungs in the acute form. Our patient was treated with corticosteroids, though the efficacy of this treatment is disputed. Penicillin did not prevent the development of the abnormalities in the lung, with leucocytosis and high fever. As the aspirated material in cases like this is sterile it might be better not to give prophylactic antibiotic treatment routinely but only if signs of secondary infection appear.

References


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One small slip and its consequences

MALCOLM PLEYDELL

As a medical officer of health I used to find that just one or two cases of food poisoning, let alone an outbreak, were a cause for apprehension and concern. It was only in retrospect that I could regard them with the detached interest of a detective story.

But there was perhaps one exception to this generalisation. The incident began on a beautiful summer morning with two small boys who lived on a council estate on the outskirts of a borough with a population of about 60,000. The boys obtained their parents’ consent to go fishing in a nearby stream, but once out of sight of the council houses they changed their minds and decided to explore the countryside. Soon they reached a fence with a ‘No Admission’ sign. They promptly climbed through the wire and found themselves in a completely new world of large rectangular tanks separated by parapets. There was the fascinating sound of running water; some of the tanks were full, some only partly filled; and there was a sweet but not unpleasant smell in the air. They had discovered the borough’s sewage works.

They explored further, but in walking along the top of a parapet one boy lost his balance and fell into a settling tank. He regained his feet, and fortunately the water level only came up to his neck. The difficulty was that he could not reach the top of the parapet to pull himself out, and his friend looking anxiously down could not pull him out by his hands, his jersey, or his hair. It was one of those occasions when children suddenly become adults. In a hurried discussion the boys decided that the one who had fallen into the tank should stay exactly where he was, quite still, while his companion ran back to the housing estate to raise the alarm.

Not long afterwards the whole estate knew what had happened. Housewives in coloured aprons began running across the fields towards the sewage works, followed by men with ladders, ropes, and anything useful to hand. When they arrived they found that the boy was still safe where he had been left. He had not moved, and with the help of ladders and ropes he was pulled to safety. White with shock and exhaustion, he collapsed on the ground. Soon an ambulance arrived and he was taken away to the local infectious diseases hospital. Subsequent examinations showed that he had...