

Immunocompromised patients and drug resistance

Patients with compromised immune systems, such as those with advanced HIV infection, can develop persistent invasive lesions due to herpes simplex virus (see fig B on the *BMJ's* website).²¹ The prevalence of virus resistant to aciclovir may reach 5%-10% in such populations,²² and these viruses may be associated with considerable morbidity and mortality.²³

When a poor response to initial nucleoside analogue treatment occurs, the dose should be increased to the maximum and treatment given intravenously. Swabs should be obtained for viral culture and drug susceptibility. Further non-response should prompt a change of treatment, guided by the resistance profile. In most cases, virus that is resistant to aciclovir is susceptible to foscarnet and this is considered by many to be the second line treatment of choice.²⁴ However, topical cidofovir also has efficacy in this situation.²⁵ Indeed many strains that are resistant to aciclovir are hypersensitive to cidofovir,²⁶ and this may be preferred in view of its relative lack of toxicity and ease of administration compared with intravenous foscarnet. Currently, topical cidofovir is not commercially available and requires preparation within the hospital pharmacy.

Conclusion

Genital herpes is a common infection that is frequently unrecognised or misdiagnosed. In our experience patients diagnosed with genital herpes often have received suboptimal treatment and poor advice concerning transmission. Many patients feel stigmatised and psychologically distressed as well as being in considerable pain. Effective counselling and adequate antiviral treatment (including suppressive treatment) can make a major difference to their quality of life.

Competing interests: SD and ST have received reimbursements for attending conferences, fees for speaking, and research funding from GlaxoWellcome and SmithKline Beecham. DB and DP have received support from the same companies for Public Health Laboratory Service research. SD holds shares in Smith-Kline Beecham.

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Corrections and clarifications

Revolutionary delivery and management of information

Email addresses again: an important letter seems to have dropped off the address of the author (Marc A Swerdlow) of this letter (1 July, p 52). The correct email address is Msverld2000@aol.com.

ABC of complementary medicine: Massage therapies

As we have remarked before, some errors take a while to be noticed. In this article last year by Andrew Vickers and Catherine Zollman (6 November 1999, pp 1254-7) a couple of historical inaccuracies crept into the second paragraph. Per Henrik [not Hendrik] Ling systemised European massage in the early 19th [not 18th] century.

Effect of restrictions on smoking at home, at school, and in public places on teenage smoking: cross sectional study

An error in transcription in this paper by Melanie A Wakefield and colleagues (4 August, pp 333-7) resulted in the wrong web address being given for reference 18. The correct address is www.uic.edu/orgs/impacteen/pub_fs.htm.

Obituary

We apologise for omitting to say that Dr John McRobert (29 July, p 304) practised in Actworth near Pontefract in West Yorkshire.

Improving the debate on cannabis

The letter from William Notcutt on encouraging research into the therapeutic uses of cannabis (17 June, p 1671) did not include a statement on competing interests but should have done. Dr Notcutt is undertaking a trial of medicinal grade extract of cannabis in chronic pain that is supported by G W Pharmaceuticals, the suppliers of the medicine. The company has also paid for travelling expenses for Dr Notcutt to speak at conferences.

Dr Notcutt is not alone in thinking that these are not financial competing interests, but by our definitions they are. We should make clear that we did not send Dr Notcutt one of our standard forms on competing interests (www.bmj.com/content/vol317/issue7154/fulltext/supplemental/291/index.shtml#aut), but he did submit his letter originally as a rapid response, where we specifically state: "We ask authors to declare any competing interests."