follows: "The experimental evidence given in the present paper does not . . . support the view that the use of asthma inhalers containing isoprotanol will result in death due to the cardiotoxicity of the isoproterenol, or the fluorocarbon propellants, or to the interaction of isoproterenol and hyposia." This is the direct opposite of the position taken by Dr. Archer's colleagues no work of his own to support his views.

In referring to the work of Brooks, et al., Dr. Archer neglected to state that the occasional electrocardiographic changes seen after inhalation of propellants and isoprenaline were assessed by the authors as being inconsequential. In another experiment conducted in man, two subjects were exposed to 1% fluoroterroral for 2.5 hours. E.C.G. continuously monitored. No abnormalities were observed.

A study which provides conclusive evidence of the safety of fluorocarbons 11 and 12 in clinical use was conducted in Germany. Ten patients severely ill from a bronchopulmonary disease with a mean 

Paco2 of 54-9 mm Hg and Paco2 of 47-2 mm Hg were given 10 inhalations of a propellant mixture containing 10% fluorocarbon and 90% air. No significant E.C.G. changes were observed. It would appear from this and other published data that Dr. Archer's apprehension about the safety of the present bronchodilator inhalers in asthmatic patients is entirely unwarranted. I am, etc.,

ALEX SILVERGLADE

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12 Fiebel, H., Wettengel, R., and Hartmann, W., Deutsche medizinische Wochenschrift, 1972, 97, 428.

Diagnosis of Childhood Spinal Muscular Atrophy

SIR,—Following your leading article (6 October, p. 2), I would like to draw readers' attention to the electromyographic findings in spinal muscular atrophy, and in particular to a report described by Bachtahl and Olsen from Copenhagen which appears to be pathognomonic of this condition. In addition to the usual findings in anterior horn cell disease, three-quarters of their patients showed regular spontaneous electromyographic activity in relaxed muscle and in sleep. The frequency of these spontaneous discharges varied between 5 and 15/sec.

Since this report appeared I have looked for this phenomenon in many children with neuromuscular diseases. Up to the present I have found such activity in most children who prove to have spinal muscular atrophy and not in any other condition. It can be found with needle or even surface electrodes providing one waits for relaxation to occur and may then continue for many minutes. It is doubtful if, in a child with the typical clinical picture and these electromyographic findings, a muscle biopsy is required for diagnostic purposes.—I am, etc.,

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Drug-induced Respiratory Disorders

SIR,—We read with interest your leading article on this subject (12 May, p. 320). In the paragraph dealing with pulmonary hypertension induced by appetite-suppressing drugs, however, it is stated that this effect cannot be reproduced in animal experiments. This statement, however, is valid only up to three years ago. In the meantime several reports have been published. For instance, in an article in the British Medical Journal, 1972, 222, 786, we mentioned a case of severe pulmonary hypertension in a patient treated with metronidazole (Flagyl) with relief of diarrhoea and regain in weight.

This summer we have also seen an outbreak of giardiasis in a group of children who had just returned from a visit to India and stool cultures taken by their general practitioners were negative for pathogens. Microscopy of the stools, however, revealed numerous cysts of Giardia lamblia. Both patients were treated with metronidazole (Flagyl) with relief of diarrhoea and regain in weight.

It is likely to become more common in Britain. I am, etc.,

A. M. GEDDES
Department of Communicable and Tropical Diseases, Birmingham Children's Hospital, Birmingham

Giardiasis in England

SIR,—Two young men have recently been admitted to this department for investigation of persistent diarrhoea associated with the passing of pale, bulky stools and significant loss of weight. Both had just returned from a visit to India and stool cultures taken by their general practitioners were negative for pathogens. Microscopy of the stools, however, revealed numerous cysts of Giardia lamblia. Both patients were treated with metronidazole (Flagyl) with relief of diarrhoea and regain in weight.

This summer we have also seen an outbreak of giardiasis in a group of children who had just returned from a visit to the Mediterranean. Some of these children complained of abdominal pain and at least one was referred to a surgical unit.

G. lamblia is found throughout the world and is most common in tropical countries. Giardiasis normally presents as a mild enteritis, but severe infection of the small bowel may lead to malabsorption, which can lead to diagnostic difficulty unless microscopic examination of the diarrhoea is performed. With increasing foreign travel giardiasis is likely to become more common in Britain. I am, etc.,

A. M. GEDDES

Late Advertising of Hospital Posts

SIR,—Dr. T. D. Culbert's letter (13 October, p. 111) does require some comment. There are at least two good reasons for his four applicants neither attending for interview nor informing the hospital. They may never have received invitations to attend or these may have arrived too late. In any case, a well-run administration asks the candidate to confirm that he will attend. If no reply is received no one should be surprised if the candidate does not appear at the interview, though someone might trouble to check the candidate's progress.

Unlikely? Not at all. Last year I got 48 hours' notice to attend for an interview at a consultant post at a London teaching hospital, and this only because I happened to call the hospital on that day. The other candidates (who lived in London) had just 24 hours' notice.—I am, etc.,

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Medically Oriented Language Courses

SIR,—I have some reservations about the value of medically oriented language courses as suggested by the Chairman of the Medical Education Panel (8 September, p. 546). Let us, by all means, learn European languages to help us to become good Europeans and to participate in the riches of European culture. But the difficulties in communicating in a foreign language have little relation to technical words, which are usually easily recognized though they may have a French, German, or Italian form. Some years ago I drew attention to the futility of publishing Russian dictionaries of medical terms, when in fact the only problem in many cases was