Correspondence

Immunological studies in inflammatory bowel disease
SIR,—The leading article by Ferguson (*Gut* 1983; **24**: 687–91) on immunological studies in inflammatory bowel disease, and the paper by Fiocchi *et al* (pp. 692–701) prompted us to refer our data on T function in Crohn's disease.

While studying T rosette serum inhibitory factors in chronic active liver disease,¹ we also tested, as a disease control group, 14 sera from coeliac disease untreated patients. Rosette inhibitory factors were detected in 36% coeliac disease sera and they were associated with immunoglobulin factors reacting in immunofluorescence with purified T lymphocyte. Furthermore, inhibitory activity was abolished by treatment of sera with (NH₄)₂SO₄, which precipitates gammaglobulin fraction. We conclude that in some coeliac disease cases serum immunoglobulin factors, which can interfere with T lymphocyte functions, are present.

We agree that direct studies on intestinal lymphoid system are likely to be the best way to detect immunological abnormalities underlying these diseases, but we would like to point out that also at this level results are rather conflicting. In fact, other authors² have reported reduced suppressor cell activity in intestinal lymphocytes from patients with coeliac disease. Furthermore, our data would suggest that systemic factors also may be relevant in modulating immune reactions in these conditions.

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References

- 1 Zauli, D, Bianchi FB, Fusconi M, Crespi C, Pisi E. Evaluation of serum rosette inhibitory factors in chronic liver disease. *Clin Exp Immunol* 1983; **53**: 145–50.
- 2 Goodacre RL, Bienenstock J. Reduced suppressor cell activity in intestinal lymphocytes from patients with Crohn's disease. *Gastroenterology* 1982; **82**: 653–8.

Books

Manual of paediatric parenteral nutrition Edited by John A Kerner Jr. (Pp. 365; illustrated; £33.25.) New York: John Wiley, 1983.

In the late 1960s, Dudrick and Wilmore successfully showed that an adequate calorie intake could be provided solely by the intravenous route, and allow an infant to grow and develop normally. Parenteral nutrition has become a standard technique in both paediatric and adult gastroenterology, and this volume is a distillate of the experience and practice of the nutritional support team of Stanford University Medical Centre. The subject is covered comprehensively, and the chapters range from indications and specific requirements to practical aspects such as biochemical monitoring, nursing care and an extremely valuable contribution on ethics and psychosocial problems. The information given on specific requirements is very variable in quality – if only all these chapters were as good as that devoted to fat requirements! The potentially difficult period, when prolonged catabolism is reversed to anabolism and vast swings in the requirements of specific substances, is hardly discussed. Two other chapters on solution preparation problems and the transition to enteral feeding also deal with the key issues poorly, though the data on precipitation are valuable. Many of the commercial solutions discussed are different from those available on this side of the Atlantic, but this is only of minor inconvenience. With the ever increasing proliferation of microcomputers, there is not only a chapter on the use of computers, but also a program that generates solution mixing instructions, bottle labels and a record for the patient's notes. The program will run on any CP/M compatible computer.

In a rapidly changing field in which new information is constantly being generated, the authors have produced a book which is up to date, contains adequate references, and will be invaluable to house staff and registrars involved in feeding patients intravenously.

P J MILLA

Total parenteral nutrition in the hospital and at home Edited by K N Jeejeebhoy. (Pp. 255; illustrated; \$85.00.) Florida: CRC Press, Inc, 1983. Professor Jeejeebhoy's unit in Toronto is well-known for its work in the field of nutrition both for its experimental work and for the practical management of patients in hospital and at home. His new book concentrates on the latter aspect of his work and has additional chapters by members of the departments of surgery, pharmacy, and nursing. Unlike the majority of recent books on the subject, which often concentrate on theoretical aspects, this book is a highly specific down-to-earth practical manual. It contains chapters describing the

Practical paediatric gastroenterology By J A Walker-Smith, J R Hamilton, and W A Walker. (Pp. 400; illustrated; £27.00.) London: Butterworth, 1983.

This book, the latest in the *Postgraduate Paediatric Series* published by Butterworths, has the stated intention of providing a very practical yet up to date approach to paediatric gastroenterology that would be appropriate for trainee paediatricians, established paediatricians, and general practitioners. The authors, from England (ex-Australia), Canada, and the USA have aimed 'to bridge the North Atlantic by producing a text that would take account of practices in our three countries in this rapidly advancing subject where clinical practice may vary from centre to centre'. They have succeeded admirably in their aim in a well produced volume of 400 pages and moderate price.

In the small but growing world of paediatric gastroenterology, it is likely that, not only will the authors be friends of each other, but (as in this case) they will be friends of the reviewer as well. One can therefore look for evidence of personal hobby horses – there are a few, and none the worse for that, in a generally well balanced text. One can have the fun of 'looking for the join' – spotting which chapters were written by which authors – not a difficult task when the special interests of each author are well known. But rather easy too for the general reader to detect which chapters emanated from the North American continent – why is it that, in general, authors from North America refer to the European literature so parsimoniously?

The text is divided into two parts. An excellent section on gastrointestinal symptoms and signs in childhood is followed by a categorised account of specific disease entities. Each chapter has a short list of important references. Common disorders are given their proper place, but the unusual are covered briefly too, thus making the book a very useful addition to the library of the practising paediatric gastroenterologist. The brief chapter on diarrhoeal disease in developing communities by Michael Rowland (MRC, The Gambia) serves to remind us, in Jon Rohde's memorable phrase, of the need to 'take science where the diarrhoea is'.

ALEXANDER S NCNEISH

News

2nd International Symposium on Inflammatory Bowel Diseases

This symposium will take place in Jerusalem from 8–11 September 1985. Further details from Dr Daniel Rachmilewitz, PO Box 50006, Tel Aviv, Israel.

International Symposium on Experimental and New Therapeutic Approaches to Ulcer Disease

This symposium will be held in Pécs, Hungary, from 6–7 August 1984 after the 9th International Congress of Pharmacology (London, UK). Further information may be obtained from Dr Gy Mózsik, 1st Department of Medicine, University Medical School, H-7643, Pécs, Hungary.

American Pancreatic Association

The annual joint scientific meeting of the American Pancreatic Association and the National Pancreatic Cancer Project will be held on 8 and 9 November 1984, at the Ambassador West Hotel, in Chicago, Illinois. Further information from Dr Vay Liang W Go, Mayo Clinic, Rochester, Minnesota 55905, USA.

Leeds Course in Clinical Nutrition 1984

This course will be held at the University of Leeds (Department of Medicine), St James's University Hospital, from 4–6 September 1984. Further details from Mr T D Bilham, Director of Continuing Education, Dept of Adult & Continuing Education, University of Leeds, Leeds LS2 9JT.

Indian Society of Gastroenterology

The Silver Jubilee annual conference will be held in Bombay from 2–5 November 1984. Further information may be obtained from Dr T E Udawadia, Organising Secretary, XXV Annual Conf. ISG, Cook's Building, Dr D N Road, Bombay 400 001, India.

Correction

The patients referred to in the letter by Zauli *et al* (*Gut* 1984; **25**: 215) suffered from **Crohn's disease** – not coeliac disease as stated.