imaging procedures in patients, however, and we would welcome alternate suggestions by Dr Charnley. We have at least one year follow up of all participants which does not challenge any diagnoses in the main report.

E JAN IRVINE AND RICHARD H HUNT

*Division of Gastroenterology,
McMaster University,
1200 Main Street W,
Hamilton, Ontario,
Canada L8N 3Z5*

Family occurrence of achalasia

SIR,—The familial occurrence of achalasia or diffuse oesophageal spasm in four families described by Dr Frieling (*Gut* 1988; **29**: 1595–602) and colleagues is of considerable interest as is their review of other recorded instances of the disease involving members of the same family. The preponderance of horizontal transmission leads them to suggest inheritance through an autosomal recessive gene. This pattern of involvement, however, would be compatible with common exposure to some agent in the family environment in the past because the development of clinical symptomatology almost certainly lags many years behind the initiation of the pathological process.

We have been able to find only one instance of achalasia in monozygotic twins¹ which suggests that the disease is not usually genetically determined. In a study of 1012 first degree relatives of 167 patients with achalasia we were unable to detect one established case of achalasia and none of the 447 siblings of patients with achalasia had the disease although several had oesophageal symptoms.² This indicates that in the vast majority of patients no hereditary factor is present and those in which there is a family history of the disease are an interesting but atypical minority. In our view it would be wrong to suggest that achalasia or diffuse oesophageal spasm are inherited disorders and thus divert attention from the search for an environmental causative agent.

J F MAYBERRY AND M ATKINSON

*Dept of Surgery,
University Hospital,
Queen's Medical Centre,
Nottingham NG7 2UH*

References

- 1 Stein DT, Knauer CM. Achalasia in monozygotic twins. *Dig Dis Sci* 1982; **27**: 636–40.
- 2 Mayberry JF, Atkinson M. A study of swallowing difficulties in first degree relatives of patients with achalasia. *Thorax* 1985; **40**: 391–3.

News

Holland Digestive Disease Week

The 75th Anniversary of the Netherlands Society of Gastroenterology will be held from 21–24 June, 1989, at the RAI Congress Centre, Amsterdam, The Netherlands. For further information, please contact the HDDW Congress Bureau, QLT/Congrex, Keizersgracht 782, 1017 EC Amsterdam, The Netherlands. Tel: +31(0)20-261372.

International Conference on Gall Stones and their Management

To be held in Jerusalem from 25–28 February, 1990. For information contact: Gallstone Conference, Vered Congress, 15 Weizman Street, Nes Ziona 70400, Israel.

Hong Kong Canadian Conference of Gastroenterology and Hepatology

This conference is organised by the Canadian Association of Gastroenterology, Hong Kong Society of Gastroenterology, and the Hong Kong Association for the Study of Liver Diseases, and will be held at the Hong Kong Convention and Exhibition Centre and Queen Mary Hospital, Hong Kong, from 30 November to 2 December, 1989. Details from the Secretariat, Dept of Medicine, Queen Mary Hospital, Hong Kong.

Therapy with Amino Acids and Analogues

The 1st International Congress will be held in Vienna, Austria, from 7–12 August, 1989. Details from: Dr Gert Lubec, President, University of Vienna, Dept of Paediatrics, A1090 Vienna, Wahringer Gürtel 18, Austria.

XIVth International Update on Liver Disease

To be held at the Royal Free Hospital, Pond Street, London NW3 2QG from 13–15 July, 1989. For further details and information: Professor Neil McIntyre, Academic Department of Medicine, Royal Free Hospital, Pond Street, London NW3 2QG. Tel: 01-794 0500, ext 3969.

5th International Congress on Interventional Ultrasound

To be held from 29 August to 1 September, 1989. Details from Spadille Congress Service, Sommervej 3, DK-2730, Hornbaek, Denmark.