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The object of *Gut* is to publish original papers and reviews concerned with practice and research in the field of gastroenterology. The field is that of alimentary, hepatic, or pancreatic disease, and papers may cover the medical, surgical, radiological, or historical aspects. They may also deal with the basic sciences concerned with the alimentary tract, including experimental work. The report of a single case will be accepted only if it is of sufficient interest in relation to a wider field of research.

COMMUNICATIONS Papers should be addressed to the Editor, *Gut*, BMA House, Tavistock Square, London, WC1H 9JR. Papers are accepted only on the understanding that they are not published elsewhere without previous sanction of the Editorial Committee. They should be in double-spaced typewriting on one side of the paper only. On the paper the name of the author should appear with initials (or distinguishing Christian name) only, and the name and address of the hospital or laboratory where the work was performed. A definition of the position held by each of the authors in the hospital or laboratory should be stated in a covering letter to the Editor. Communications should be kept short, and illustrations should be included when necessary; coloured illustrations are allowed only if monochrome will not satisfactorily demonstrate the condition. It is not desirable that results should be shown both as tables and graphs.

ILLUSTRATIONS Diagrams should be drawn in indian ink on white paper, Bristol board, or blue-squared paper. The legends for illustrations should be typed on a separate sheet and numbered to conform with the relevant illustrations. Photographs and photomicrographs should be on glossy paper, unmounted. TABLES should not be included in the body of the text, but should be typed on a separate sheet.

ETHICS The critical assessment of papers submitted will include ethical considerations. Authors are referred to publications on ethics of human experimentation by the Medical Research Council in Britain and to the code of ethics of the World Medical Association known as the Declaration of Helsinki (see *Brit. med. J.*, 1964, 2, 177).

ABBREVIATIONS In general, symbols and abbreviations should be those used by the *Biochemical Journal*. In any paper concerning electrolyte metabolism, it is desirable that data be calculated as m-equiv/l. All measurements should be expressed in SI units and authors are referred to *J. clin. Path.*, 27, 590-597.

REFERENCES These should be made by inserting the

name of the author followed by year of publication in brackets. At the end of the paper, references should be arranged in alphabetical order of authors' names. Such references should give authors' name, followed by initials and year of publication in brackets, the *title of the article quoted*, the name of the journal in which the article appeared, the volume number in arabic numerals, followed by the numbers of first and last pages of the article.

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The July 1975 Issue

THE JULY 1975 ISSUE CONTAINS THE FOLLOWING PAPERS

Aspects of the effect of metiamide on pentagastrin-stimulated and basal gastric secretion of acid and pepsin in man B. THJODLEIFSSON AND K. G. WORMSLEY

Gastric emptying following vagotomy and antrectomy and proximal gastric vagotomy H. KALBASI, F. R. HUDSON, A. HERRING, S. MOSS, H. I. GLASS, AND J. SPENCER

Electronmicroscopic observations on the effects of orally administered aspirin and aspirin-bicarbonate mixtures on the development of gastric mucosal damage in the rat K. D. RAINSFORD

A search for a transmissible agent in Crohn's disease RICHARD V. HEATLEY, P. M. BOLTON, E. OWEN, W. JONES WILLIAMS, AND L. E. HUGHES

A case of 'Crohn's carcinoma' K. A. FLEMING AND A. C. POLLOCK

The immune response to ØX 174 in man. III. Evidence for an association between hyposplenism and immunodeficiency in patients with coeliac disease P. G. BAKER, J. VERRIER JONES, D. B. PEACOCK, AND A. E. READ

Regional differences in oxalate absorption by rat intestine: Evidence for excessive absorption by the colon in steatorrhoea D. R. SAUNDERS, J. SILLERY, AND G. B. McDONALD

The relative potency of the Crick-Harper-Raper unit and the GIH clinical unit of secretion JOAN M. BRAGANZA, HENRY T. HOWAT, AND G. KAY

The Paneth cell: A source of intestinal lysozyme T. PEETERS AND G. VANTRAPPEN

Disodium cromoglycate in the treatment of chronic proctitis R. V. HEATLEY, B. J. CALCRAFT, J. RHODES, E. OWEN, AND B. K. EVANS

Progress report

Duodenal ulcer in black populations in Africa south of the Sahara F. I. TOVEY AND M. TUNSTALL

Notes and activities

Notes on books

Copies are still available and may be obtained from the PUBLISHING MANAGER, BRITISH MEDICAL ASSOCIATION, TAVISTOCK SQUARE, LONDON WC1H 9JR, price £2.00, including postage

Notes and activities

The Practise and Science of Colorectal Surgery

The Proctological Section of the Royal Society of Medicine held a successful meeting on 4, 5 and 6 June at the Society's House in London when delegates from European countries were invited. The title of the meeting was 'The practise and science of colorectal surgery' and it was attended by almost 250 surgeons and physicians, of whom 150 came from all the European countries, with the largest delegation from West Germany.

ANO-RECTAL DISEASE

There were three main symposia. The first was on ano-rectal disease and chaired by Professor Lohr from Kiel, when papers from Professor Steltzner (Frankfurt), Professor Duhamel (Paris), and Professor Kerremans (Louvain) demonstrated the advances in the understanding of the ano-rectal sphincter mechanism and the part played by functional disorders in the production of rectal prolapse, the descending perineal syndrome and constipation. Mr K. R. P. Rutter showed how abnormalities in the sphincter can result in the solitary ulcer syndrome. The session was concluded by the President of the Section of Proctology, Mr A. G. Parks, who spoke of his extensive experience in the management of high ano-rectal fistulae.

COLO-RECTAL CANCER

The second symposium on colo-rectal cancer was chaired by Professor Hollaender from Strasbourg. The aetiology of carcinoma of the rectum with special reference to the breakdown of bile salts by clostridia in the bowel flora was described by Dr Michael Hill, and the polyp cancer sequence demonstrated by Dr Basil Morson, who now believes that almost all malignant neoplasms of the colon develop from benign neoplastic tumours. Dr Christopher Williams showed the value of colonoscopy in the diagnosis of cancer of the colon and Professor Hollaender himself spoke of the treatment of villous tumours of the rectum. An interesting paper by Dr Druner from Heidelberg showed that psychosocial rehabilitation of the patient with a permanent colostomy was as important in Germany as it is considered to be in Britain; too often, the patient is thought by his surgeon to have adjusted

to his colostomy better than facts suggest.

INFLAMMATORY BOWEL DISEASE

The last symposium was chaired by Professor Goligher, and was on inflammatory bowel disease. Pathological and epidemiological considerations were presented by Dr Urban Krause and the medical aspects of treatment by Dr A. M. Dawson. The results of surgical treatment at St Mark's Hospital were presented by Dr Jean Ritchie, while Dr Huguet from St Antoine's Hospital in Paris showed that ileostomy is rarely carried out in France, and that most patients with inflammatory bowel disease requiring colectomy have an ileo-rectal anastomosis, but with a mortality rate that many surgeons in Britain would find unacceptable. Professor Goligher himself described his experience with Kock's reservoir ileostomy, pointing out the complications and stressing the fact that it was still at the stage when the operation should be done for specific indications in units treating a large number of patients with bowel disease.

FREE PAPERS

There were too many free papers in the scientific sessions to enumerate them, but Mr P. J. Jeffery gave a paper describing a new technique for the treatment of cavernous haemangioma of the rectum with preservation of the anal sphincter. Dr Feustal from Erlangen presented results with a continent colostomy technique. A syelastic-coated magnetized steel ring was fitted subcutaneously when an end colostomy was performed, and this was kept closed by a metal cap over the top of the colostomy. A valve was incorporated to allow gas to escape and he claims success with this method of management.

IRRADIATION TREATMENT

The final scientific session was chaired by Professor Steipa from Rome, and interesting papers were presented on the irradiation treatment of cancer of the rectum by Mme Parturier-Albot from Paris, and the treatment of squamous cell carcinoma of the anal canal from Dr Jean Papillon from Lyons. Dr Mary Catterall spoke on the use of fast neutrons in the treatment of advanced cancer of the ano-rectal region, and it was useful having these three eminent radiotherapists discussing their techniques and answering questions together. In the same session Dr B. W. Wells and Dr L. P. Fielding presented further data suggesting that the long-term prognosis of patients with obstructing

carcinoma of the colon is significantly better following immediate resection rather than resection two or three weeks after a preliminary colostomy.

THE BANQUET AT GUILDHALL

No account of this meeting would be complete without mentioning the social programme, which was highlighted by a banquet at the Guildhall on 6 June. This was attended by the Lord Mayor of London, Sir Murray Fox and Lady Fox, and by the Sheriffs and their ladies; also present was Sir John Stalworthy, the President of the Royal Society of Medicine.

P.R.H.

Professor of Clinical Histopathology

The title of Professor of Clinical Histopathology has been conferred on Dr P. J. Scheuer in respect of his post at the Royal Free Hospital Medical School where he has been senior lecturer and reader in histopathology. Professor Scheuer is very well known for his work on liver diseases.

Notes on books

Surgery of the Anus, Rectum and Colon 3rd edition by J. C. Goligher. (Pp. viii + 1164; 608 figures. £21.00.) Bailliere Tindall, London. 1975. This third edition provides a most comprehensive survey of anal, rectal, and colonic diseases. There have been extensive revisions including a separate chapter on Crohn's disease. Special attention has been given to methods of treating haemorrhoids by manual dilatation and by cryosurgery; on fiberoptic colonoscopy and the continent ileostomy of Koch. It remains the major reference work in this field.

Travel Medicine A Handbook for Practitioners by Anthony C. Turner. (Pp. xi + 250. £4.25.) Churchill Livingstone, Edinburgh, London, and New York. 1975. This book brings home the medical problems of modern travel, particularly to and from warm climates. The first half of the book consists of advice the doctor should give to his patients before they travel. The second half basically covers the differential diagnosis and treatment of the most likely diseases to be brought home by businessmen, holiday makers and immigrants. In addition there are chapters assessing the individual's fitness to travel by air and to reside in warm climates.