Correspondence

Endoscopic retrieval of miniature battery

SIR,—As experience accumulates, so a compromise policy on the timing of surgical or endoscopic intervention has emerged in cases of miniature battery ingestion. Early endoscopy, in the protocol of the Long Island Regional Poison Control Centre is mandatory if the battery is sited in the oesophagus or persists in the stomach after 24 hours. Otherwise, it is described as optional.

We would like to emphasise two points emerging from a recent case of battery ingestion in a 3 year old child, where radiological confirmation of the battery in the stomach was followed by a decision to attempt early endoscopic removal with a paediatric endoscope under general anaesthetic at four hours after ingestion:— (I) On experimenting with a similar battery before the endoscopy, it was clear that the basket forceps were less successful than the toothed forceps (which could accommodate the battery side-on), because of the smooth slippery surface of the casing. If coin grasping forceps are too small or not available, toothed forceps in our opinion are the next best option. (II) At only four hours, the difference in the casing of the battery on retrieval compared with its unswallowed partner, was striking.

In vitro tests at pH 1·5 have shown evidence of leaking as early as two hours.2 The urinary mercury level was not raised, nor was there endoscopic evidence of mucosal damage in this case, but we remain impressed by the early dissolution of the swallowed battery casing. In a review of 56 cases,3 symptoms developed in four of 51 cases where the battery passed the cardia. Early endoscopic removal not only removes any danger of toxicity, but also greatly reduces radiographic exposure and hospital stay.

J A WILSON and E M PHILLIPS

Ninewells Hospital, Dundee,
and New East Surrey Hospital, Redhill, Surrey.

References


Books


This book is one of many short texts on gastroenterology aimed at medical students and young postgraduates preparing for examinations. The fact that it is in its 4th edition (the first having appeared in 1975) suggests that it finds a ready market. Almost a fifth of its pages are given over to a series of multiple choice questions which are referenced to appropriate pages in the text.

The first six chapters deal with different gastrointestinal organs; the remaining cover infectious diseases, hormonal GI diseases, functional diseases, endoscopy, and common symptoms. In 200 pages it is clearly impossible to cover these topics comprehensively and there are inevitably omissions and a number of minor errors because of oversimplification. Sadly, as the book is aimed at medical students, little attention is paid to the anatomy, physiology, and biochemistry which is needed to understand diseases of the gastrointestinal tract and liver. Most chapters have a list of
references, but these are rather patchy and tend to refer only to other textbooks. There are no references on common symptoms.

This book will have little appeal for regular readers of _Gut_, but it was not intended for them. At £19.95 I cannot imagine it will have any appeal for British medical students or postgraduates either. Certainly they can buy equivalent books more cheaply.

NEIL MCINTYRE

Intestinal transport: fundamental and comparative aspects

This compilation of 26 papers on intestinal transport presented at a conference in 1982 contains four sections. The first is on methodology and the influence of extracellular compartments, and the second on molecular aspects of membrane transport – for example, lipid-protein interactions, and includes studies using vesicles. The third section deals with neurohumoral control including intracellular influences of Ca, K and cyclic nucleotides and the final section with comparative aspects and includes accounts of work on fish (13 different species), bird, silkworm, bull frog and elephant; clinical studies are scarcely referred to. Twelve of the articles are based on experiments using electrophysiological techniques, not necessarily of the Ussing-chamber type, but no one yet seems to have used the patch-clamp technique of Neher and Sackmann for the study of single transmembrane channels in enterocytes. Particularly recommended is the chapter by Englehardt and Rechkemmer on the absorption by the colon of inorganic ions and short-chain fatty acids. Although the quality of the articles varies, the editing is excellent (but compare the paracellular routes in the electrical analogues on pages 305 and 326), and the reader is spared a record of the discussions. Unless these are well organised and edited as in Ciba symposia, such accounts are rarely useful. The index is comprehensive and as is usual with this publisher, the volume is beautifully produced. It is well worth a place in a departmental library.

D S PARSONS

Gastrointestinal endoscopy and related procedures

This is a practical book written primarily for nurses and assistants by the nurse in charge and the senior gastroenterologist at the Stoke City General Hospital – a unit which long has had a high reputation for its interest in teaching endoscopy. Each part of the gastrointestinal tract is dealt with anatomically with a very brief outline of its structure, its function and common pathology. This is aimed at giving the nurse an insight into the role of each part of the gastrointestinal tract. The tests are then described including the preparation of the patient, any possible complications that might occur and the nurses role is emphasised throughout. The text is well written, but sadly it starts on a low spot in the very first line on the foreword where the invention of the fibreoptic endoscope was apparently made in 1888! It is then followed by a rather uncertain chapter giving an overall view of the nurses role which contributes less than the other chapters to the overall effect of the book. It then gets down to business with a description of the facilities of a GI Unit, of the equipment that it should carry, giving clear lists, and excellent diagrams of several practical procedures such as clearing block channels in the instruments which are of real value. There are frequent check lists throughout and this must be of immense help to any harrrased GI Unit especially if there is any turnover of staff.

There are no endoscopic photographs or descriptions of technique (these are covered by other texts such as Cotton and Williams) but the reproduction of radiograph plates and sometimes equipment is only just adequate. Despite these comments, however, the book more than achieves what it sets out to do. It provides a practical text for the nurse assistant in the endoscopy unit and is full of ideas and practical tips which make the running of the unit more efficient and the care of the instruments much more satisfactory. I am in no doubt that every unit really should have a copy of this book available, for it would benefit not only the nurse, but through her the endoscopist and the patient.

D G COLIN-JONES

News

European Organisation for Cooperation in Cancer Prevention Studies
Third Annual ECP Symposium will take place in Aarhus, Denmark, from 19–21 June 1985, on the topic 'Diet and human carcinogenesis'. Further information from Mr J Geboers, c/o Division of Epidemiology, Sint-Rafael University Hospital, Capucijnenvoer 33, B-3000, Leuven, Belgium.