

**Endoscopic diagnosis of a bleeding ileal carcinoid tumour**

SIR,—In your February 1984 issue, Rees and Banciewicz<sup>1</sup> report of a case of an ileal polyp that was detected preoperatively by colonoscopy and confirmed by preoperative endoscopy. Histology subsequently showed this to be a primary carcinoid tumour of the ileum. Hamilton *et al*<sup>2</sup> reported a case of an ileal carcinoid tumour diagnosed at laparotomy in the correspondence section of the September issue. Both reports discuss the difficulty of diagnosing primary small intestinal carcinoid tumours prior to laparotomy.

We believe that the diagnosis of primary carcinoid tumours of the ileum can be made reliably by the barium infusion examination (small bowel enema, enterocolysis) of the small intestine (Sellink technique).<sup>3</sup> We have recently reported the results in 11 patients<sup>4</sup> and have subsequently detected multiple ileal carcinoid tumours in a twelfth patient. Ten of the patients presented with the carcinoid syndrome and the remaining two with non-specific small (2–3 cm) intramural lesions. One case had had a barium meal and follow-through examination carried out elsewhere and the intraluminal lesion had not been detected. We are not aware of any case in whom we have missed a primary ileal carcinoid tumour since we adopted the infusion examination.

The distention of the intestine obtained with the barium infusion allows detailed views of the ileum to be obtained. Although gastrointestinal bleeding was not a prominent feature in our cases we think it is likely that the infusion examination would have shown the carcinoid tumours in the two cases mentioned above.

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**References**

- 1 Rees WDW, Banciewicz J. Endoscopic diagnosis of a bleeding ileal carcinoid tumour. *Gut* 1984; **25**: 211–2.
- 2 Hamilton MS, Cranston D, Lloyd-Williams K. Gastrointestinal carcinoid tumours. [Letter] *Gut* 1984; **25**: 1016.
- 3 Sellink JL, Miller RE. *Radiology of the small bowel: technique and atlas*. The Hague: Martinus Nijhoff, 1982.
- 4 Jeffree MA, Barter SJ, Hemingway AP, Nolan DJ. Primary carcinoid tumours of the ileum: the radiological appearances. *Clin Radiol* 1984; **35**: 451–5.

**Books**

**Neonatal gastroenterology: contemporary issues** Edited by M S Tanner and R J Stocks. (Pp. 228; illustrated; £25.) Newcastle-upon-Tyne: Intercept Ltd, 1984.

Many years ago, *Reader's Digest* defined an infant as an alimentary tract with a loud noise at one end and no sense of responsibility at the other, thus highlighting the extent to which infant feeding and its sequelae dominate the layman's view of paediatrics. If paediatric gastroenterology is to be seen as a discipline distinct from that of adults, then within that discipline the neonates form the most evidently special group of patients. This book, subtitled *Contemporary Issues* brings into focus recent advances in our understanding of the gut of the newborn. Most but not all the chapters are based on papers presented at a symposium in Leicester in 1983, and are produced by a distinguished group of authors from both sides of the Atlantic. It is a good blend of basic science and clinical practice. Thus, there are chapters dealing with normal development of the intestine (Milla) and exocrine pancreas (Lebenthal and Heitlinger), congenital enzyme disorders of the small intestine (Schmitz an outstanding contribution by a Frenchman writing beautiful English), intestinal permeability in the newborn (Udall and Walker), intestinal adaptation (Hughes), and the relationships of hormones, nutrition and the gut (Lucas). Knowledge of normal and abnormal development has resulted in rational therapeutic approaches to problems as diverse as the feeding of preterm infants (Stocks and Davies), the management of Hirschsprung's disease and other neuronal disorders of the hind gut (Howard and Garrett, another outstanding chapter), neonatal cholestatic jaundice (Johnson), prevention of perinatal hepatitis B transmission (Flower and Tanner), neonation necrotising enterocolitis (Rom) and early screening for cystic fibrosis (Kuzemko, Heely and Richmond). The editors themselves have added a philosophical commentary of adaptation to extra-uterine life to complete the volume.

I have two minor, perhaps carping criticisms. First, there are too many spelling errors (the price of a short publication interval). Secondly, the discussion following some of the chapters is reproduced verbatim and should have been ruthlessly edited. It was sometimes irritating to read comments from named but otherwise unidentified contributors. This point relates to a criticism which has been recently expressed about the formal publishing as books of collections of papers

presented at symposia and workshops. As the editor of two such volumes I may be biased but I believe they can be justified if: (a) the material is well selected, up to date and not readily available in standard text, and (b) they are good. On both counts this book is a success. As an indication of the healthy status of the young (if not newly born) subspecialty of paediatric gastroenterology I would recommend it warmly to my adult colleagues as well as to fellow paediatricians. It is attractively produced, moderately priced, and very rewarding to read.

J A DODGE

**Interpretation of liver biopsies. (Biopsy interpretation series.)** By R J Stenger. (Pp. 175; illustrated; \$42.50.) New York: Raven Press, 1983.

This attractive little book comprises a great deal of information into its 169 pages of text. It claims to be a primer on liver disease and as such is acceptable. It is also intended to help with the interpretation of liver biopsies and in this respect there are deficiencies. To take as an example a biopsy containing Mallory's hyaline, we are referred to alcoholic hyaline from the index and read a good description of the material and a discussion of its nature; but are directed to the literature to find the conditions other than alcoholism in which hyaline is found. To be fair, however, it is possible to find the additional conditions in the text, but only if you know where to look.

The book gains in value in the way that the text reproduced the discussions two pathologists would have when examining a liver biopsy. In this respect all is well for pathologists who have easy access to microscope slides; a clinician requiring similar benefit might be tempted to rely on the many photographs throughout the book. I am afraid these are of poor quality, the definition in many is poor and I suspect they have been reproduced in black and white from colour transparencies. The legends often refer to features not visible in the photographs.

The references and bibliography, important in such a small work, are mainly well chosen. It may seem a good idea to refer often to monographs, but many are not available in small libraries whereas the original articles in popular journals could be found.

At £30 this book is not expensive and provides a good introduction to its subject. It will not replace existing works on liver biopsy interpretation.

DAVID J P HOOK

## News

### Cystic Fibrosis

The British Paediatric Association is conducting a national survey of all patients with cystic fibrosis. The organisers are aware that their knowledge of patients is incomplete in relation to adults who have left the care of paediatricians, and may not be under the care of an adult Cystic Fibrosis Clinic. If you can help us trace these patients, we urgently need to know their names, sex, dates of birth and towns of residence, but their actual addresses are not necessary as no attempt will be made to make direct contact with any patients. Please send any information to: Mrs C Turner, BPA Cystic Fibrosis Survey, Department of Child Health, University Hospital of Wales, Cardiff CF4 4XN.

### Course in Diagnostic Liver and Gastrointestinal Pathology

A week-long course on the above will be held at the RPMS, Hammersmith Hospital, from 9–13 September 1985. Further details from the School Office, Royal Postgraduate Medical School, Hammersmith Hospital, Ducane Road, London W12 0HS.

### Radiology of the Small Intestine

A one-day course will be held on 8 June 1985 at the John Radcliffe Hospital, Oxford. Further details are obtainable from Dr D J Nolan, Department of Radiology, John Radcliffe Hospital, Oxford OX3 9DU.

### Sixth International Symposium on Gastrointestinal Hormones

This symposium will be held on 6–10 June 1985 at the University of British Columbia, Vancouver, BC, Canada. Further details from the Secretariat, c/o Venue West Ltd, 801–750 Jervis Street, Vancouver, BC, V6E 2A9.

### Third International Teaching Workshop on Operative Digestive Endoscopy

This Workshop will be held from 17–19 June 1985 at the Hôpital Erasme, Brussels, Belgium. Further details from Dr A Van Gossum, Hôpital Erasme, route de Lennik 808, B1070 Brussels, Belgium.

### Disorders of Eating Behaviour

An international symposium will be held from 12–15 September 1985 at Pavia, Italy. Further details from Prof E Ferrari, Clinica Medica I°, Policlinico S Matteo, 27100 Pavia, Italy.