HCG test had shown that the cryptorchid testes were very active (therefore the syndrome was not due to testosterone lack) while from biopsy material, both androgens and oestrogens were synthesized from precursors. It was stated in conclusion that the HCG test yields precise information regarding testicular endocrine function, quantitatively and qualitatively, and that if defective testosterone synthesis is indicated by an increase in pre-hormone without a corresponding rise in testosterone, then from testicular biopsy material the precise defect can be determined.


During the period January 1972 to March 1973, 486 children with acute lower respiratory tract infections were admitted to the general medical wards of the Royal Hospital for Sick Children, Edinburgh (12% of total admissions). Of these, 15 had been transferred to the Respiratory Care Unit and 11 treated with endotracheal intubation and intermittent positive pressure ventilation (IPPV). The respiratory syncytial virus (RSV) had been the main aetiological agent isolated from 90 (16%) of the original 486 patients and 11 of the 15 respiratory care patients. The modes of presentation of the latter group varied, namely, progressive respiratory distress, apnoeic attacks, cardiorespiratory collapse, and increased intracranial pressure with decerebrate posturing. Irrespective of the presentation, an arterial P CO₂ exceeding 65 to 70 mmHg in air or oxygen had been the main indication for IPPV. Further details of the management of these patients were presented and the possible relevance of the aetiological findings were discussed.

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