cyanotic congenital heart disease in infancy and may be profound. Evidence of CNS and cardiovascular depression are usually found, and prognosis is adversely affected. The intravenous or oral administration of bicarbonate may be helpful as a temporary measure in some patients.

**Use of an Accelerometer in Phonocardiography in Childhood**

Douglas Pickering  
*Oxford*

A series of phonocardiography records taken in children with various congenital heart defects was shown. These were recorded using an accelerometer which, because of its small size and ease of application, is a useful tool in small children. The instrument may be used to record ultra-low frequency movements and displacement.

**Needle Biopsy of Liver in Differential Diagnosis of Obstructive Jaundice in Infancy**

Richard White  
*Birmingham*

The differential diagnosis of obstructive jaundice in infancy continues to be a problem. Rare causes, such as cytomegalovirus infection and galactosaemia, can be distinguished by the appropriate tests. Most of the remainder have either biliary atresia or the 'neonatal hepatitis syndrome', and it is customary to perform open biopsy and cholangiography, since liver function tests, including transaminases, do not give clear-cut distinction. Because of the known risks of surgery in hepatitis, an investigation was undertaken to assess the diagnostic reliability of needle biopsy of the liver, as well as its risks.

In a series of 36 infants, the final diagnosis was established on the basis of (1) histological features, (2) laparotomy findings, including cholangiography, and (3) follow-up. Needle biopsy was carried out in all 36. In 25 it was done on the operating table immediately before pre-arranged laparotomy. No instance of serious bleeding was seen. In the remaining patients laparotomy was performed later, except in one patient who was examined *post mortem*. The histological findings of needle and surgical biopsy specimens were compared 'blind', and found to give almost identical results. Reasons for occasional technical failures were discussed.

It is concluded that, in experienced hands, needle biopsy can play a useful part in the differential diagnosis of obstructive jaundice in infancy.

**Depression of Delayed Hypersensitivity: a New Hypothesis**

J. Verrier Jones and W. J. Harrison  
*Bristol*

Conditions associated with depression of Mantoux reaction were reviewed. These include measles, influenza, infective hepatitis, and glandular fever. The significance of the negative Mantoux reaction in some cases of sarcoidosis was considered. Patients with sarcoidosis also failed to develop delayed hypersensitivity to chemical allergens such as dinitrochlorobenzene. The usual reason given for this failure is that patients with sarcoidosis are 'immunologically bankrupt'. A hypothesis was proposed linking the facts in sarcoidosis with those in other diseases, and suggesting that depression of delayed hypersensitivity may result from competition between simultaneously administered antigens. Experimental work in guinea-pigs supports this.

**Retinal Photography in the Newborn**

David Baum  
*London*

The technique of retinal photography was described, with special reference to those difficulties peculiar to the newborn. The appearance of the normal mature and premature fundus was described. A preliminary report was presented of studies on retinal haemorrhage and oxygen-induced vasoconstriction, together with illustrative photographs. The technique of fluorescein angiography of the retina was outlined, and its possible scope in the newborn discussed.