8. MATTERS CONCERNING GOVERNMENT DEPARTMENTS

(a) *Department of Health and Social Security*: The Association was greatly saddened by the loss of Dr. F. Riley who was the Department's Observer at the time of his death. Dr. Eileen Ring replaced Dr. Riley and has been of great assistance.

During the year the Association has presented written evidence to several enquiries, and made formal or informal comments upon reports from the Department. These include:

- (i) The Green Paper on the Structure of the National Health Service.
- (ii) Committee on Domiciliary Midwifery and Maternity Bed Needs (Peel Committee).
- (iii) Committee on Nursing (Asa Briggs Committee).
- (iv) Working Party on Medical Administrators (Hunter Working Party).
- (v) Committee on the Use of Fetuses, Fetal Organs, and Tissues for Research.

The Association has been consulted on matters concerning poisoning in childhood, rubella surveillance, and special care baby units. Members of the Association have either as representatives of the Association or as individuals served upon Departmental Committees, Working Parties, and Expert Panels.

Council is also grateful to the Scottish Home and Health Department and to its Observer, Dr. Mabel Mitchell, for help and advice. Dr. Jenkins of the Welsh Office has been most helpful as Observer.

(b) *Department of Education and Science*: Council is grateful to Dr. T. Kingsley Whitmore for advice.

(c) *General Register Office*: Discussions have been held regarding the certification of cot deaths.

9. MATTERS CONCERNING OTHER ASSOCIATIONS AND OFFICIAL BODIES

1. *Royal College of Physicians*: (a) Joint Committee on Higher Medical Training: the Association is represented on the Specialist Advisory Committee on Paediatrics by Dr. F. S. W. Brimblecombe, Dr. A. D. M. Jackson, Professor T. E. Oppé, and Dr. J. W. Platt.

(b) Paediatric Committee: the Association's representatives are The President, Professor S. D. M. Court, and Dr. A. D. M. Jackson.

Council is satisfied that through the Association's formal representation on these Committees, and through individual members of the Association who also serve upon them, the views of the Association on post-graduate training, specialist accreditation and other relevant matters are fully considered.

2. *Royal College of Obstetricians and Gynaecologists*: (a) the Working Party, set up on the initiative of the Association, has considered with representatives of the nursing profession the requirements for post-certificate training of nurses in special care of the newborn. A report will be made to the Board of Clinical Nursing Studies.

(b) Evidence was prepared for the enquiry on the Unplanned Pregnancy undertaken by the R.C.O.G.

3. *Royal College of General Practitioners*: The joint Working Party (Dr. W. Henderson and Dr. White

Franklin) has continued its investigation into the medical needs of children and has received a grant from the Rowntree Trust.

4. *Confederation Europeenne des Syndicats Nationaux Associations et Sections Professionnelles de Pédiatres (C.E.S.P.)*: until Britain becomes a member country of the European Common Market, the Association participates only as an observer. Professor A. Holzel and Dr. D. MacCarthy have acted as representatives and reported upon the probable paediatric consequences of entry into the Common Market.

The Annual Meeting considered a memorandum from Council and approved the proposals (i) that the President should serve for three years; (ii) that Council would favourably consider nominations of Senior Registrars and Lecturers for Ordinary Membership of the Association.

Scientific Sessions

Scientific sessions were held in the Spa Theatre, Scarborough, on Thursday and Friday, 22 and 23 April and the following communications were presented.

S. R. MEADOW (Leeds). 'Schönlein-Henoch Syndrome and Kidney Disease.' Schönlein-Henoch syndrome is a common condition of childhood. Though the obvious manifestations involve the skin, joints, and alimentary system it has become clear that the main mortality and morbidity are from renal complications. The syndrome causes some of the most aggressive renal disease that is seen in children.

Children referred with renal problems associated with Schönlein-Henoch syndrome have been studied prospectively. A detailed clinico-pathological study has been completed on 88 such children all of whom had full renal investigation including biopsy. Most of them have been followed up for 2 years and several for much longer.

Severe renal disease was commonest above the age of 6. Thirty-four children had nephrotic syndrome, 35 had severe acute nephritis. Yet only 3 children died. Two years after onset most appeared completely normal, or had minor urinary abnormalities. Only 8 had diminished renal function or hypertension. Prolonged follow-up does not suggest that progressive renal failure is occurring in those with minor urinary abnormalities.

The children had a variety of treatments. Corticosteroids do not appear to help the renal disease. The role of cytotoxic drugs is uncertain.

Renal biopsy within 3 months of onset gives a reliable indication of the prognosis.

However severe the initial illness it is worth great effort to steer the child through the acute phase for the long term outlook is much better than has previously been thought.

R. H. R. WHITE and E. F. GLASGOW (Birmingham). 'Focal Glomerulosclerosis—A Progressive Lesion Associated with Steroid-Resistant Nephrotic Syndrome.'

In a recent study of 145 nephrotic children (White, Glasgow, and Mills, 1970) we reported focal and seg-