If oral cloxacillin is used prophylactically (a) \textit{Staph. albus} is not significantly affected; (b) diphtheroids increase in incidence and numbers; (c) 'faecal' organisms may appear on the skin.

A case in which preoperative treatment with cloxacillin possibly contributed to development of ventriculitis was briefly described.

A. W. Craft. Royal Victoria Infirmary, Newcastle. 'Head injury in children'. Accidents in childhood are a major problem, many resulting in a head injury and in 1971 in Newcastle 14\% of admissions of children to the paediatric wards of the two major hospitals were for this reason.

In previous studies the incidence of post-traumatic sequelae has varied between 0.1 and 45\% and to clarify this further, 300 children admitted to hospital with a head injury have been studied. The behaviour patterns of school-aged children before and after the accident were assessed using the Rutter behaviour inventory designed for parents and teachers, a control group being used for comparison of pre-accident behaviour patterns.

The results indicate that children who had a head injury were more likely to have shown abnormal behaviour patterns before the accident than the control group. Many children show abnormal behaviour both before and after the head injury, but of those who were normal before the accident the incidence of abnormal behaviour at 2 years is less than 10\%. The children exhibiting abnormal postaccident behaviour were not only those with the more severe head injuries. The incidence of neurological sequelae and post-traumatic epilepsy is low.

\textbf{Windermere Lecture.} The Lecture was delivered on 24 April by Dr. Donald Pinkel, Memphis, Tennessee. 'Acute leukaemia in childhood.'

\section*{Neonatal Society}

\textbf{Meeting held on 7 February 1974 at St. Thomas’s Hospital, London S.E.1}

\textbf{Communications}

\textbf{Preliminary experience in measurement of ionized calcium in neonates using the calcium selective flow-through system.} R. Horton, D. Hardy, and D. Flynn. Department of Paediatrics, Royal Free Hospital, Liverpool Road, London N.1.


\textbf{Coagulation failure in babies with severe rhesus isoimmunization.} E. N. Hey and P. M. Jones. Royal Victoria Infirmary, Queen Victoria Road, Newcastle-upon-Tyne 1.

\textbf{Lymphoreticular aggregates in lungs of newborns and infants.} J. L. Emery and F. Dinsdale. Department of Pathology, The Children's Hospital, Sheffield S10 2TH.

\textbf{Biological role of milk.} B. Reiter (introduced by E. M. Widdowson). National Institute for Research in Dairying, Shinfield, Reading.

\textbf{Continuous positive airway pressure (CPAP) treatment of severe respiratory distress syndrome.} P. M. Dunn and B. D. Speidel. University of Bristol, Department of Child Health, Southmead Hospital, Bristol BS10 5NB.

\textbf{Observations of the effect of CPAP on respiration of infants with severe RDS.} B. D. Speidel and P. M. Dunn. University of Bristol, Department of Child Health, Southmead Hospital, Bristol BS10 5NB.

\textbf{Dietary protein intake and early postnatal growth in small-for-dates infants.} D. P. Davies. Department of Child Health, Welsh National School of Medicine, Heath Park, Cardiff.

\textbf{Use of a new disposable catheter-tip transducer for continuous monitoring of blood oxygen tension in neonates.} H. Scott. Department of Child Health, Hammersmith Hospital, Du Cane Road, London W.12.

\textbf{D. Parker.} Department of Medical Physics, University College Hospital, Gower Street, London W.C.1.

\textbf{Immediate effects of feeding on blood gases and some cardiorespiratory functions in ill newborn infants.} A. Wilkinson and V. Y. H. Yu (introduced by J. P. M. Tizard). Department of Paediatrics, John Radcliffe Hospital, Headington, Oxford OX3 9DU.

Honorary General Secretary, Professor David Hull, Department of Child Health, City Hospital, Hucknall Road, Nottingham NG5 1PB.

Meetings Secretary, Dr. Maureen Young, Department of Gynaecology, St. Thomas's Hospital Medical School, London S.E.1.