Measles immunisation in atopic eczema

Sir,

Last year a communication from the Department of Health and Social Security indicated that there was an upsurge of measles notifications in early 1988 and emphasised that allergy to hen's egg is no longer considered to be a contraindication to measles immunisation unless associated with an anaphylactoid reaction. This specific contraindication also applies to the MMR vaccination.

In 1984/1985 we performed a questionnaire study of all children with atopic eczema who had attended a dermatology clinic at the Hospital for Sick Children, Great Ormond Street, at any time in the previous four years. Questionnaires were also answered by non-eczematous controls matched for age and social class. There was an 82-7% response with 128 cases and 117 controls out of a total of 148 pairs of questionnaires. Measles immunisation had been withheld for inappropriate reasons from 28-9% of the eczematous children and 2-6% of controls.

Although this questionnaire response reflects attitudes among health professionals in the early 1980s it is our impression that a considerable number of atopic children, particularly those with atopic eczema and those with a vague and unsubstantiated history of egg allergy, are still inappropriately denied immunisation. Approximately 10% of children will experience atopic eczema at some stage in their childhood and there is evidence that this is increasing.

Uncertainty in the profession as to the contraindications to immunisation in this group may adversely affect the immunisation rate for the population as a whole. We welcome the latest attempts by the Department of Health and Social Security to clarify this issue.

References

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Neonatology—then and now (C M Walker)

Monitoring blood oxygen (1957)

Blood oxygen studies in premature infants

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In the early 1950s there was some debate as to whether the lower and variable oxygen saturations observed in premature babies were of importance and whether or not they required correction. The observation that the irregular (periodic) respirations of premature babies became regular when they were given oxygen was observed personally (CHMW) even in babies born at full term in the Mile High City of Denver, Colorado. The respiratory mechanisms of some of the latter apparently respond to the lower ambient partial pressures of oxygen at altitudes of 5000 feet just as do preterm babies at lower altitudes.

The purpose of this study was therefore to measure the effect of administering 55-60% oxygen to premature babies for one hour. The birth weights of these babies were not given but it is presumed that they were below 2500 g. While PO2 'in the lung' (presumably alveolar air) was used in calculations of dissolved oxygen, arterial PO2 could not be measured in small volumes of blood and all estimations in those days were in terms of percentage saturation and content in volumes percent. As might be expected increases in saturation (up to 105%) and content (up to 31 volumes %) were observed even with as little as 55-60% oxygen.