

T lymphocytes expressing gamma-delta are invariably increased in the gut epithelium in coeliac disease and occasionally in other enteropathies, but only in infancy.<sup>5</sup> It is not possible at present to use monoclonal antibodies for these markers on paraffin sections so old biopsy specimens in paraffin blocks cannot be used. So it will thus take some years to determine this point.

Finally it is disappointing that the authors<sup>1</sup> use the term transient coeliac disease rather than transient gluten intolerance as recommended by ESPGAN since 1970.<sup>4</sup> Coeliac disease, although perhaps expressing itself in different ways in the small intestinal mucosa at different times of life, is by definition a permanent lifetime disorder.

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#### Long term survival after heart transplantation for doxorubicin induced cardiomyopathy

SIR,—We read with interest the case report of the child with severe cardiomyopathy requiring cardiac transplantation after the administration of doxorubicin.<sup>1</sup> We wish to emphasise the increasing problem of anthracycline induced cardiomyopathy not only in the short term, as is the reported patient, but also many years after its use.

#### Case report

This girl presented at the age of 4·8 years with a Wilms' tumour. She initially underwent laparotomy and removal of the tumour and was found to have stage III disease. Chemotherapy with vincristine, actinomycin D, and doxorubicin (Adriamycin) was commenced. She went on to receive radiotherapy in a dose of 2000 cGy to the renal bed; the field did not include the heart. Chemotherapy was continued with cycles of three weeks for a further 11 months; she received a total dose of 360 mg/m<sup>2</sup> of doxorubicin.

She remained well until December 1990, when at the age of 15·3 years she presented with a three week history of malaise and lethargy with abdominal pain and vomiting. Four days before her admission she developed symptoms of breathlessness, orthopnoea, and weight gain. She was found to have severe congestive cardiac failure confirmed on echocardiography, which also revealed an extensive mural thrombus in the left ventricle.

Despite an initial response to conventional treatment with diuretics and angiotensin converting enzyme inhibitors, her myocardial function remained poor and she underwent orthotopic cardiac transplantation in March 1991. She remains well.

The acute cardiac toxicity of anthracyclines is well recognised with the recent reports of doses as low as 40 mg/m<sup>2</sup> causing some degree of cardiac dysfunction.<sup>2</sup> We are now seeing late toxicity with increasing frequency and it is vital that these children remain on regular follow up, and that there is good liaison with adult physicians who also require access to the patient's records and details of chemotherapy received.

With the improved survival of many of the childhood malignancies, it is essential to consider whether the more frequent use of anthracyclines is justified.

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- 1 Arico M, Pedroni E, Nespoli I, Vigano M, Porta F, Burgio GR. Long term survival after heart transplantation for doxorubicin induced cardiomyopathy. *Arch Dis Child* 1991;66: 985-6.
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#### Aristotle, Francois Mauriceau, and plagiarism

SIR,—I write to defend a venerable colleague against the charges of plagiarism raised against him by Professor Dunn in January issue of this journal.<sup>1</sup> I refer, of course, to Francois Mauriceau (1637-1709), who was accused by Professor Dunn of having 'lifted' his recommendation of the dorsal recumbent delivery position from an ancient obstetrical treatise by Aristotle, which was cited in an 18th century translation called *Aristotle's Experienced Midwife*.

There are, however, no genuine extant obstetrical treatises written by Aristotle. On the contrary, towards the end of the 17th century there began to appear a number of anonymous medical and sexual 'self help'

books or 'marriage manuals' attributed to Aristotle. They were reprinted extensively throughout the 18th and 19th centuries and even into the 20th century. While they have their roots in medieval and renaissance lore, they freely plagiarised from 'contemporary' medical works at the time in which they were written. Among the most notable of these works are *Aristotle's Compleat Masterpiece in Three Parts, Displaying the Secrets of Nature in the Generation of Man*; *Aristotle's Book of Problems . . . Touching the State of Man's Body*; *Aristotle's Last Legacy Unfolding the Mysteries of Nature in the Generation of Man*; and Professor Dunn's 'Aristotleian' treatise, *Aristotle's Compleat and Experienced Midwife*.<sup>2</sup> This source dates from the mid-18th century and was published well after Hugh Chamberlen's English translation of Mauriceau's work on obstetrics in 1673.

The similarities in style are best explained by the anonymous 'Aristotle' lifting his text from Chamberlen's translation of Mauriceau, not the other way around. Rather than being the culprit, Mauriceau is the victim in this instance. Professor Dunn owes him an apology!

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#### Professor Dunn comments:

Plagiarism, or the passing off of the ideas of another as one's own, is something we all do to a greater or lesser extent. As Wilson Mizner has pointed out: 'If you steal from one person it's plagiarism; if you steal from many, it's research'! Dr Wall's speculation that Mauriceau was himself plagiarised by the anonymous 18th century author or editor of *Aristotle's Compleat and Experienced Midwife*, rather than that he plagiarised Aristotle as I suggested in my article, is of considerable interest. If he is correct, as he may well be, then I certainly owe Mauriceau an apology. Even more so I would need to apologise to the reputation of Aristotle for incorrectly asserting that he, alone among the classical workers, had advocated that women adopt the unphysiological dorsal position for delivery. If I were Dr Wall's 'venerable colleague' I would much prefer to be found guilty of plagiarism than of being responsible for introducing into Western obstetrics a practice which has made childbirth more painful, more difficult, and more dangerous for both mother and child.