With the survival of more very premature babies there has been an increase in the number of cases of retinopathy of prematurity (ROP). Careful monitoring of oxygen treatment does not prevent all cases and there is a need to understand the possible importance of other factors. Work in Liverpool (European Journal of Pediatrics 1993; 152: 833–6) has shown that a half of the 184 very low birthweight infants examined developed ROP. Logistic regression analysis of 17 clinical variables showed that only two factors were independently associated with the risk and severity of ROP. These were gestational age and frequency of blood transfusion. The authors hypothesise that blood transfusions, by increasing the amount of free iron in the circulation, may lead to damage from oxygen derived free radicals.

Workers at the University of Utah in Salt Lake City have tried to make hip extensor strengthening exercises enjoyable for children with cerebral palsy by developing a tricycle which is propelled by hip extension with the child strapped into a near standing position. (Developmental Medicine and Child Neurology 1993; 35: 1048–54). After use of the tricycle gait apparently improved and parents seemed impressed but it was not possible to demonstrate increased hip extensor power.

The indications for treatment with intravenous immunoglobulin are steadily expanding. A trial on adult patients (New England Journal of Medicine 1993; 329: 1993–2000) shows that it may be useful in dermatomyositis. Patients with disease resistant to treatment with steroids or immunosuppressants were given immunoglobulin. Nine of 12 patients treated improved from ‘severe disability’ to ‘nearly normal’. None of the 11 patients receiving placebo infusions showed major improvement. Five patients had repeat muscle biopsy and their improvement in strength was accompanied by an improvement in the biopsy appearances.

If only a fraction of the things planned for the year 2000 comes to fruition the world will enter the 21st century in better fettle. One such aim is the World Health Assembly’s Poliomyelitis Eradication Initiative announced in 1988. The elimination of wild poliovirus infection from Latin America was announced in 1992. It is estimated that a successful global eradication programme could pay for itself by the year 1998. An article in the Lancet (1993; 342: 1461–4) summarises progress and prospects. The outlook seems promising with the use of oral vaccine, inactivated vaccine, and combined schedules tailored to the needs of different regions.

Use of the term ‘birth asphyxia’ has come under attack. This term and related terms such as hypoxic-ischaemic encephalopathy or postasphyxial encephalopathy are sometimes used when there is no good evidence of asphyxia. A task force of the World Federation of Neurology (Developmental Medicine and Child Neurology 1993; 35: 1022–4) has recommended that the non-committal term ‘neonatal encephalopathy of early onset’ should be used instead and more attempts made to define its causes using techniques such as magnetic resonance spectroscopy and near infrared spectroscopy.

A supplement to the International Journal of Epidemiology (1993; 22: Suppl I) reports on American backed projects for child health in Africa. Concentrating on immunisation, oral rehydration therapy, and antimalarial treatment for fever has resulted in a 33% fall in mortality of children aged 1 to 4 years in Zaire. A report from Liberia, though, ended, ‘The progress achieved between 1984 and 1988 has now been destroyed by civil war’. On reading this Lucina, who has never been in total control of her own limbic system, choked on her breakfast ambrosia, performed a Heimlich manoeuvre on herself, and gasped something about peace, love, and human frailty.

The diagnosis of Smith-Lemli-Opitz syndrome has until now been dependent on the clinical features — small head, characteristic face, global learning disorder, and abnormalities of limbs, genitalia, endocrine system, eyes, heart, and kidneys. Now a possible biochemical test has been described (New England Journal of Medicine 1994; 330: 107–13). Five children with the syndrome all had a combination of low plasma cholesterol and very high concentrations of the cholesterol precursor 7-dehydrocholesterol. Compounds which produce a block at this level of cholesterol metabolism give rise to similar physical abnormalities when given to embryonic rats. Apparently it is important to use chromatographic assays as colorimetric methods often used to measure cholesterol may give falsely high results.

Parvovirus B19 causes erythema infectiosum (slapped cheek disease). A strange condition given the same popular- purpuric glove and socks syndrome (PPGSS) was described in five young Swiss adults in 1990. Two reports since then have suggested that it too may be caused by parvovirus B19. A 9 year old girl in Iowa City was recently thought to have the same condition (Pediatrics 1993; 92: 864–5). All cases have occurred in spring or summer. Fever and lassitude lasted the rush by about a week. There is often oedema of the extremities and the characteristic rash consists of fine papules and petechiae covering the hands and feet but stopping abruptly at the wrists and ankles. Erythematous or ulcerating lesions may be seen in the mouth and there is often a leukopenia. This girl’s lassitude lasted four to six weeks.

Middle aged Finnish men with a low income have a relative risk of dying about 2.5 times greater than high earners (Lancet 1994; 343: 524–7). Whether the high earners had low or high social status as children made little difference. Most of these men, however, were children during the second world war and the economic devastation in Finland brought about by the war was so great that it is possible that any effect of social status was lost at that time.

Mothers in New York state who smoked in pregnancy were, on the whole, less intelligent and more socially deprived than other mothers (Pediatrics 1994; 93: 221–7). Nevertheless, at 3 or 4 years of age their children had a small but significant shortfall in intelligence compared with the children of non-smoking mothers even after making statistical allowance for these other influences. In a second paper in the same issue (pages 228–33) the same workers show that the deficit can be prevented by a programme of antenatal home visits by nurses providing support and health education (including advice about smoking).