



Under one third of children account for over two thirds of general practice child consultations. A study in Southampton (*British Journal of General Practice* 2001;**51**:977–82) has shown that frequent (three or more per year) child consultations are associated with council house tenancy, the parents' perception and intolerance of medically unexplained physical symptoms in the child, the parents' own frequent attendance, and parental depression or anxiety.

Up to 25% of infants with severe symptomatic congenital cytomegalovirus (CMV) infection have CMV retinitis. This retinitis usually does not progress after birth but late progression has been described. It is not known whether antiviral treatment affects prognosis. A 9-day old baby in London (*British Journal of Ophthalmology* 2001;**86**:248–9) had active progressive bilateral CMV retinitis with severe symptomatic (microcephaly, periventricular calcification, and occipital horn cysts) congenital CMV infection. Treatment with intravenous ganciclovir was followed by rapid resolution of the active retinal changes but there was residual damage to the eyes and at 5 months the baby was not fixating with the left eye but would fix on bright objects with the right eye. The authors of this report recommend early treatment of active congenital CMV retinitis.

Infants brought to the accident and emergency department with crying or screaming as the only complaint are no more likely than other children attending the accident and emergency department to be placed on the child protection register over the next 6 years. In Sheffield (*Emergency Medicine Journal* 2002;**19**:17–18) 450 children (mean age 5.5 months) who presented with screaming or crying and 450 controls were followed after an average of 6 years. Twelve of the screaming/crying group and ten controls had been placed on the child protection register during the period of follow up.

Childhood obesity is a worldwide problem but its prevalence and associated factors vary from country to country. National data from Russia (1992), China (1993), and USA (1988–94) have been analysed against US standards for body mass index (BMI) (*International Journal of Epidemiology* 2001;**30**:1129–36). Among children aged 6–18 years the prevalence of obesity (BMI

95th percentile or greater) was 11.1% (USA), 6.0% (Russia), and 3.6% (China). The respective prevalences of overweight (BMI equal to or greater than 85th percentile but less than 95th percentile) were 14.3%, 10.0%, and 3.4%. In Russia and China obesity was associated with higher family income but in the USA the reverse was true. Urban living was associated with higher risk of obesity in China but lower risk in Russia.

In diabetes-prone mice one of the  $\beta$  cell proteins against which autoimmunity develops is the heat-shock protein. Injecting a peptide (p277) of this protein into the mice inhibits the destruction of  $\beta$  cells. Now researchers in Israel (*Lancet* 2001;**358**:1749–53) have given injections of p277 to adults with newly diagnosed type 1 diabetes. The treated patients maintained serum concentrations of C-peptide over the ensuing 10 months whereas concentrations progressively declined in the group randomised to placebo. The patients given p277 needed less insulin and their autoimmunity against heat-shock protein and p277 changed from Th1 to Th2 cytokine type.

Young women are probably more susceptible to the long-term neurotoxic effects of ecstasy (3,4-methylenedioxymethamphetamine, (MDMA)) than are young men. Of 69 volunteers from the Amsterdam "rave scene" (*Lancet* 2001;**358**:1864–9), 23 were heavy users of ecstasy (previous lifetime intake 50 tablets or more), 15 were moderate users (<50 tablets), 16 were previous heavy users but had taken none in the 12 months before the study, and 15 were non-users. SPECT (single-photon-emission computed tomography) studies using a high affinity binder to serotonin transporters showed a significant decrease in serotonin transporter density in the brains of female, but not male, heavy users of ecstasy. The findings in moderate users were not significantly different from those in non-users. In female previous heavy users there was recovery of serotonin transporter density suggesting that the neurotoxicity may be reversible.

In Charlottesville, Virginia (*New England Journal of Medicine* 2001;**345**:1660–6) 100 babies weighing less than 1000 g at birth were randomised within 5 days of birth to intravenous fluconazole or placebo for 6 weeks. Fungal colonisation occurred in 11 of 50 infants given fluconazole and in 30 of

50 given placebo (saline). Invasive fungal infection occurred in 10 of the control group but in none of the treated group. There were no apparent adverse effects of treatment.

Could folate supplementation in pregnancy protect against common acute lymphoblastic leukaemia (ALL) in children? Without prior hypothesis researchers in Perth, Australia (*Lancet* 2001;**358**:1935–40) used a case-control design to examine 67 different maternal, family, and child variables and found a highly significant association between iron and folate supplementation in pregnancy and protection from ALL in the child. The odds ratio for ALL after supplementation with iron alone was 0.75 and after iron plus folate 0.40. (Only one of 249 mothers took folate without iron). It seems odd, though, that the protective effect of folate plus iron was independent of the duration of supplementation or its timing in pregnancy. Now the hypothesis is presented no doubt more data will be forthcoming.

Theories come and theories go and those of us whose main interest is the health of children need to remain aware of general theories about the health of adults. For much of the 1990s it seemed likely that ill health and mortality in adults was related not only to their level of income but also to the extent of income inequality within their communities. Now four papers in one issue of the *British Medical Journal* (2002;**324**:13–6, 16–9, 20–3, and 23–5; see also editorial, *ibid*: 1–2) have dealt what is claimed to be a fatal blow to the theory. Studies in Denmark, Japan, and the USA did not show a significant effect of income inequality on adult health and mortality after adjustment for confounding variables such as cardiac risk factors and level of education.

In published case control studies, a history of undescended testis is associated with a 1.6- to 17.1-fold increase in risk of testicular cancer. Researchers in Germany (*International Journal of Epidemiology* 2001;**30**:1050–6) found that the odds ratio was dependent on whether the history was obtained from the man or his mother and on the strictness of definition of undescended testis. With information supplied by the mother and including retractile testis the odds ratio was only 1.6. With information from the man himself and including only undescended testis treated surgically the odds ratio was 5.4.