

## Letters to the Editor

### **Pandemic influenza and the viral haemorrhagic fevers**

*From Colonel E E Vella*

*Reader in Military Pathology*

*Royal Army Medical College, London*

Sir, For some time now the viral haemorrhagic fevers (VHFs) have occupied greatly the attention of the World Health Organization and the national health authorities throughout the world. The ominous haemorrhages seen in the VHFs herald a poor prognosis for the patient. The pathophysiology of this haemorrhagic condition is arguable and may be multifactorial; for example, what part does disseminated intravascular coagulopathy play in this phenomenon (Fisher-Hoch 1983)?

At the start of the 1984 influenza vaccination season, while browsing in our library, I came across a VHF which devastated the world's population more than half a century ago. The description is that of my predecessors in the Army Medical Service:

'In the autumn outbreak constant reference is made to haemorrhage, blood being noted in the sputum and faeces. Numerous pathologists were unanimous in noting haemorrhages in the lungs, suprarenals, the brain, the pericardium, the pleura and other situations such as the rectus muscle' (MRC 1919).

What was this viral haemorrhagic fever? None other than the pandemic influenza of 1918, alias the Spanish Flu!

ETHELWALD E VELLA

30 October 1984

### **References**

**Fisher-Hoch S P**

(1983) *British Journal of Haematology* **55**, 565-571

**Medical Research Council**

(1919) Special Report Series No. 36. MRC, London; p 11

### **Anaphylaxis to DPT vaccine**

*From Dr Alexander K C Leung*

*Clinical Assistant Professor of Paediatrics*

*University of Calgary, Alberta, Canada*

Dear Sir, The first two cases in the United Kingdom of anaphylaxis to tetanus toxoid were reported in 1984 (Leung 1984a, Ratliff & Burns-Cox 1984). I have also reported an infant with truncus arteriosus who died 6 hours after he was given diphtheria, pertussis and tetanus (DPT) vaccination (Leung 1984b). I would now like to report a further patient who had an anaphylactic reaction to DPT vaccination.

A 2-month old infant, who was well before she was given 0.5 ml of adsorbed DPT vaccine intramuscularly, became cyanotic and tachypnoeic 3 hours later. The face and the tongue were swollen. She was given an injection of adrenaline subcutaneously and the symptoms subsided in 30 minutes.

Convulsions, infantile spasms, encephalopathy, permanent neurological damage and hypotonic/hyporesponsive episodes have been reported following DPT vaccination. To my knowledge, anaphylaxis to DPT vaccination with a swollen face and tongue has not been described. This report suggests that anaphylaxis to DPT vaccine, although extremely rare, may be more common than is presently appreciated. Since the benefit of DPT vaccination far outweighs its risk (Leung 1985), I would like to emphasize that this report should not discourage patients from having DPT vaccination.

Yours faithfully

ALEXANDER K C LEUNG

25 October 1984

### **References**

**Leung A**

(1984a) *Irish Medical Journal* **77**, 306

(1984b) *Canadian Medical Association Journal* **131**, 541

(1985) *American Journal of Diseases of Children* (in press)

**Ratliff D A & Burns-Cox C J**

(1984) *British Medical Journal* **288**, 144

### **Overheating and the haemorrhagic shock and encephalopathy syndrome**

*From Dr C J Bacon*

*Consultant Paediatrician*

*Friarage Hospital, Northallerton*

Dear Sir, In their editorial (September 1984 *Journal*, p 721), David and Mughal discount heatstroke as a cause of the haemorrhagic shock and encephalopathy syndrome (HSES) on the grounds that the temperature is not high enough and there is usually no evidence of overheating. I do not think that either of these arguments is valid.

First, the classic descriptions of heatstroke point out that the diagnosis rests upon the clinical features and not upon the temperature at presentation, which has often fallen since the event (Shibolet *et al.* 1967). And babies cool down quickly.

Second, in other reports of the syndrome that Levin and colleagues (1983) have termed HSES there were several instances of definite overheating: one baby had been placed close to a blazing