

and colleagues demonstrated the relationship between oestrogens and thrombo-embolism, and since that time the avoidance of oestrogens has left a hiatus. Sometimes no drug is necessary because the engorgement can settle spontaneously, but when a drug is needed, simple measures based on purgation are often ineffective, and bromocriptine can cause problems.

We encourage breast feeding, but roughly half our patients either bottle feed from the start or change early to the bottle. In those needing a drug to aid suppression we have used pyridoxine since 1975 and have found it to be effective and safe. Pyridoxine is thought to act by enhancing the natural conversion of DOPA to dopamine, which inhibits prolactin, and its use was based upon the study by Foukas, who used large doses.

Now, owing to its use in pre-menstrual tension, pyridoxine is better known, but in 1975 the safety of large doses was uncertain, and after communication with Foukas and with the Committee of Safety of Medicines, we settled for a dose of 50 mg tds, which was lower than recommended by Foukas. Given as a five-day course, subsidence of discomfort has always been rapid, although complete cessation of lactation may take several days.

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References

- Daniel D. G., Campbell H. & Turnbull A. C. (1967). Puerperal thrombo-embolism and suppression of lactation. *Lancet*, **2**, 287-290.
- Foukas M. D. (1973). An antilactogenic effect of pyridoxine. *Journal of Obstetrics and Gynaecology of the British Commonwealth*, **80**, 718-720.

Footpump Nebulizer

Sir,
There is now a commercial version of the footpump nebulizer I described in my earlier letter (*January Journal*, p.61). It is much more efficient than my Heath Robinson machine. It also avoids the risk of oil inhalation injury since there are no lubricants used in the piston. The cost of the complete unit is £15, and a white box for the device will be available at an extra £2.50.

This new nebulizer is available from: Cameron-Price (Medical Division) Ltd., 71 Melchett Road, Birmingham Factory Centre, Kings Norton, Birmingham, B30 3HL.

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Measles Vaccine

Sir,
In this area where I am working as a trainee there has been a recent outbreak of measles affecting patients of both local practices. There were 32 cases notified of indisputable measles, of which 15 had been vaccinated previously. The Schwarz strain live attenuated vaccine is used locally and has been given intramuscularly to at least 90 per cent of the 584 children born between 1972 and 1981 on the lists of the local doctors.

It was with alarm that this apparently high failure rate was noted. The current *Medicine Series* (Collier and Geddes, 1981) states that a single dose confers a high degree of protection in most recipients. It is recognized that vaccinated children may develop modified or atypical measles (Geddes

and Woodward, 1981), and indeed one local child was catarrhal, with Koplik spots but no cutaneous exanthem; however, it was not easy explaining this failure of protection to worried mothers.

These figures show only about a 3 per cent failure for the vaccine in immunized children, while 30 per cent of those not immunized contracted measles. However, extrapolated nationally, they would represent a large number of children who may catch measles despite vaccination, unless our local experience is a chance observation. Scrutiny of the community health returns may show if this is so. Can other GPs send in their experience?

A. D. T. ROBINSON

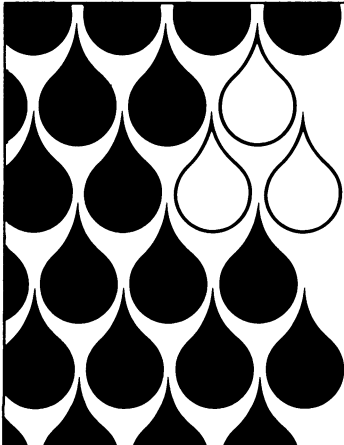
44 High Street
Lochmaben
Dumfriesshire.

References

- Collier L. & Geddes A. M. (1981). Immunization against infections—practical aspects. *Medicine International*, **1**, 18-27.
- Geddes A. M. & Woodward J. (1981). Acute exanthemas of childhood. *Medicine International*, **1**, 18-22.

GP Groups in South East Scotland

Sir,
On behalf of the South East Scotland Faculty I recently investigated activities groups in this region (excluding those specifically involving trainers or trainees). The number of groups was found out by enquiries to the GP subcommittee of the Regional Committee for Postgraduate Medical Education and from the Faculty's education com-



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