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MRCGP EXAMINATION — 1988

The dates for the next two examinations are as follows:

May/July 1988

Written papers: Wednesday 4 May 1988 at centres in London, Manchester, Edinburgh, Newcastle, Cardiff, Belfast, Dublin, Liverpool, Leeds, Birmingham and Bristol. Oral examinations: in London from 20 to 29 June inclusive and in Edinburgh from 30 June to 2 July inclusive. The closing date for applications is Friday 26 February 1988.

October/December 1988

Written papers: Tuesday 25 October 1988 at centres in London, Manchester, Edinburgh, Newcastle, Cardiff, Belfast, Dublin, Liverpool, Leeds, Birmingham, Bristol and Exeter. Oral examinations: in Edinburgh on 5 and 6 December and in London from 7 to 12 December inclusive. The closing date for applications is Friday 2 September 1988.

The examination application fee for 1988 is £200 (re-application fee £150). Further details and an application form can be obtained from the Examination Administrator, Royal College of General Practitioners, 14 Princes Gate, London SW7 1PU.

INFECTIOUS DISEASES UPDATE

Influenza vaccine 1987/88

The advisory group on influenza vaccine this year recommends vaccine containing A/Singapore/6/86 (H₁N₁) like, A/Leningrad/360/86 (H₃N₂) and B/Ann Arbor/1/86 antigens for the usual 'at risk' groups of patients. Recent batches of Fluvirin (Evans), Influvac Sub-Unit (Duphar) and MFV-Ject (Servier) contain these strains.

Campylobacter food poisoning

Although in recent years the proportion of food poisoning from campylobacter has been increasing, this year it looks as though campylobacter infections may end up outnumbering salmonella by 2:1. Why this is happening is not clear — both infections are usually related to poultry consumption. Illnesses from salmonella usually start with diarrhoea and associated fever and vomiting. Campylobacter infections frequently start with 12 to 24 hours fever and sometimes abdominal pain prior to the diarrhoea.

Products available for sterilization

Following a previous update about sterilizing medical instruments (*July Journal*, p.310), there have been enquiries about what products are available through general pharmacies for disinfecting contaminated surfaces and other equipment that cannot be heat treated. The simplest method is to use household bleach diluted 1 in 10 or Milton solution 1%. (Milton available outside hospital is 2% and this may be diluted if it is felt necessary to do so.) Both the solutions cope readily with the human immunodeficiency and hepatitis B viruses.

Meningococcal infection

There has been an outbreak of meningococcal infection in Saudi Arabia and neighbouring countries which seems to have followed the influx of people to the region for the Mecca pilgrimage. It may be that this is an extension of the annual epidemic which occurs in sub-Saharan Africa from Sudan to the Gambia just before the summer rainy season. It involves meningococcus type A, for which vaccine is available from Merieux UK Ltd (on a named patient basis): one dose gives two to three years' protection. How long the outbreak will continue is uncertain but it would seem wise to consider vaccination for the next year or two until we know whether outbreaks will recur.

Poliomyelitis

The World Health Organization's expanded programme on immunization has a target of providing poliomyelitis vaccine for all children in the world by 1990. A recent review suggests that encouraging results have been achieved, especially in Latin America and China, but that the disease is still highly endemic in Southern Asia and Africa. This emphasizes the need for travellers to ensure they are protected.

Reye's syndrome

Since 1983 there has been an ongoing nationwide survey of this acute disease, mainly occurring in children, in which hepatic and cerebral complications cause a mortality of around 50%. There were 18 probable cases between August 1986 and March 1987, showing a downward trend from previous years. It may be that publicity about the association with aspirin ingestion has had some effect. Cases do occur, however, where there is no history of taking salicylates.

Suggestions for topics to include in future updates are welcomed and should be passed to the contributor, Dr E. Walker, Communicable Diseases (Scotland) Unit, Ruchill Hospital, Glasgow G20 9NB (041-946-7120), from whom further information about the current topics can be obtained.